

**TheHousingAuthorityoftheCityofGaffney**

**PHAPlans**

5YearPlanforFiscalYears2003 -2007

AnnualPlanforFiscalYear2003

**NOTE: THISPHAPLANSTEMPLATE(HUD50075)ISTOBECOMPLETEDIN  
ACCORDANCEWITHINSTRUCTIONSLOCATEDINAPPLICABLEPIHNOTICES**

## **PHA Plan Agency Identification**

**PHAName:** Housing Authority of the City of Gaffney, SC

**PHANumber:** SC017

**PHA Fiscal Year Beginning:** (mm/yyyy) 07 -01-2003

### **Public Access to Information**

**Information regarding any activities outlined in this plan can be obtained by contacting: (select all that apply)**

- ☒ Main administrative office of the PHA
- ☐ PHA development management offices
- ☐ PHA local offices

### **Display Locations For PHA Plans and Supporting Documents**

The PHA Plans (including attachments) are available for public inspection at: (select all that apply)

- ☒ Main administrative office of the PHA
- ☐ PHA development management offices
- ☐ PHA local offices
- ☒ Main administrative office of the local government
- ☐ Main administrative office of the County government
- ☐ Main administrative office of the State government
- ☒ Public library
- ☐ PHA website
- ☐ Other (list below)

PHA Plan Supporting Documents are available for inspection at: (select all that apply)

- ☒ Main business office of the PHA
- ☐ PHA development management offices
- ☐ Other (list below)

**5-YEAR PLAN**  
**PHAF ISCAL YEARS 2002 -2006**  
[24CFRPart903.5]

**A.Mission**

State the PHA's mission for serving the needs of low-income, very low income, and extremely low-income families in the PHA's jurisdiction. (select one of the choices below)

- ☒ The mission of the PHA is the same as that of the Department of Housing and Urban Development: To promote adequate and affordable housing, economic opportunity and a suitable living environment free from discrimination.
- ☐ The PHA's mission is: (state mission here)

**B.Goals**

The goals and objectives listed below are derived from HUD's strategic Goals and Objectives and those emphasized in recent legislation. PHAs may select any of these goals and objectives as their own, or identify other goals and/or objectives. Whether selecting the HUD-suggested objectives or their own, **PHAS ARE STRONGLY ENCOURAGED TO IDENTIFY QUANTIFIABLE MEASURES OF SUCCESS IN REACHING THEIR OBJECTIVES OVER THE COURSE OF THE 5 YEARS.** (Quantifiable measures would include target sets such as: numbers of families served or PHA scores achieved.) PHAs should identify these measures in the space to the right of or below the stated objectives.

**HUD Strategic Goal: Increase the availability of decent, safe, and affordable housing.**

- ☒ PHA Goal: Expand the supply of assisted housing  
Objectives:
- ☐ Apply for additional rental vouchers:
  - ☒ Reduce public housing vacancies: **To maintain occupancy level that will result in an average vacancy rate of 5% or less for the next five years.**
  - ☐ Leverage private or other public funds to create additional housing opportunities:
  - ☐ Acquire or build units or developments
  - ☐ Other (list below)

**Progress: Vacancy rate for previous fiscal year (7-01 to 6-30-02) was reduced to 1.2%**

- ☒ PHA Goal: Improve the quality of assisted housing  
Objectives:

- ☒ Improve public housing management: (PHAS score -93) **To maintain a score of 90 or greater for each of the next five years.**
- ☐ Improve voucher management: (SEMA P score)
- ☒ Increase customer satisfaction: **To show increasing customer satisfaction throughout the next five years, as measured by survey results.**
- ☐ Concentrate on efforts to improve specific management functions: (list; e.g., public housing finance; voucher unit inspections)
- ☒ Renovate or modernize public housing units: **To maximize the use of Capital Fund grants to improve livability and aesthetics of all four sites as their age and needs demand.**
- ☐ Demolish or dispose of obsolete public housing:
- ☐ Provide replacement public housing:
- ☐ Provide replacement vouchers:
- ☐ Other: (list below)

**Progress:** All PHAS indicators have improved from prior fiscal year, which resulted in an earned High Performer rating of 93 for FY 2001/2002 as posted on REAC site on January 31, 2003. Resident satisfaction continues to remain good (above national average) as measured by survey results. Use of Capital Funds was maximized, with all work completed.

- ☒ PHA Goal: Increase assisted housing choices  
Objectives:
    - ☐ Provide voucher mobility counseling:
    - ☐ Conduct outreach efforts to potential voucher landlords
    - ☐ Increase voucher payment standards
    - ☐ Implement voucher homeownership program:
    - ☒ Implement public housing or other homeownership programs: **To develop a viable homeownership program (for selected residents with homeownership potential) before the end of the initial five year plan (6 -30-05). This program will be funded through Residual Receipts and other sources as they may become available.**
    - ☐ Implement public housing site -based waiting lists:
    - ☐ Convert public housing to vouchers:
    - ☐ Other: (list below)
- Progress:** Some contacts made for future homeownership program.

#### **HUD Strategic Goal: Improve community quality of life and economic vitality**

- ☒ PHA Goal: Provide an improved living environment  
Objectives:

☒ Implement measures to deconcentrate poverty by bringing higher income public housing households into lower income developments: **To monitor average incomes of all families in all sites and maintain an average difference of no more than +/- 15%. (No longer required by Federal Regulations) Average Household income for all sites is below Federal "Extremely Low" income limits and there is no difference above 15%.**

☐ Implement measures to promote income mixing in public housing by assuring access for lower income families into higher income developments:

☒ Implement public housing security improvements: **To strengthen our partnership with local law enforcement, with primary emphasis on the Gaffney Police Department.**

☐ Designated developments or buildings for particular resident groups (elderly, persons with disabilities)

☐ Other: (list below)

**Progress: Analysis of deconcentration continues to indicate no need for action. Partnership with Gaffney Police Department has been strengthened considerably with the continuation of a second full -time police officer and the use of some other officer on a part -time basis.**

**HUD Strategic Goal: Promote self -sufficiency and asset development of families and individuals**

☐ PHA Goal: Promote self -sufficiency and asset development of assisted households

Objectives:

☐ Increase the number and percentage of employed persons in assisted families:

☒ Provide or attract supportive services to improve assistance recipients' employability:

☐ Provide or attract supportive services to increase independence for the elderly or families with disabilities.

☐ Other: (list below)

**Progress: Memorandums of Agreement have been signed with the Department of Social Services and the Cherokee County Adult Education School to strengthen our partnerships with these groups. Began new "Parent To Parent" program to strengthen parenting skills of residents.**

**HUD Strategic Goal: Ensure Equal Opportunity in Housing for all Americans**

- ☒ PHA Goal: Ensure equal opportunity and affirmatively further fair housing  
Objectives:
- ☒ Undertake affirmative measures to ensure access to assisted housing regardless of race, color, religion, national origin, sex, familial status, and disability:
  - ☒ Undertake affirmative measures to provide a suitable living environment for families living in assisted housing, regardless of race, color, religion, national origin, sex, familial status, and disability:
  - ☐ Undertake affirmative measures to ensure accessible housing to persons with all varieties of disabilities regardless of unit size required:
  - ☐ Other: (list below)

**Progress:** Training on Fair Housing and equal opportunity issues was conducted for all staff and commissioners by the HUD -Columbia office. Further training planned.

**Other PHA Goals and Objectives: (list below)**

**Each of the above goals contains a section at its end marked (Progress:)  
This will constitute our progress report on our 5 -Year Plan.**

**AnnualPHAPlan**  
**PHAFiscalYear2003**  
[24CFRPart903.7]

**i. AnnualPlanType:**

Select which type of Annual Plan the PHA will submit.

☐ **Standard Plan**

**Streamlined Plan:**

- ☒ **High Performing PHA**  
☐ **Small Agency (<250 Public Housing Units)**  
☐ **Administering Section 8 Only**

☐ **Troubled Agency Plan**

**ii. Executive Summary of the Annual PHA Plan**

[24CFRPart903.79(r)]

Provide a brief overview of the information in the Annual Plan, including highlights of major initiatives and discretionary policies the PHA has included in the Annual Plan.

**Not Required**

**iii. Annual Plan Table of Contents**

[24CFRPart903.79(r)]

Provide a table of contents for the Annual Plan, including attachments, and a list of supporting documents available for public inspection.

**Table of Contents**

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### Attachments

Indicate which attachments are provided by selecting all that apply. Provide the attachment's name (A, B, etc.) in the space to the left of the name of the attachment. Note: If the attachment is provided as a **SEPARATE** file submission from the PHA Plans file, provide the filename in parentheses in the space to the right of the title.

#### Required Attachments:

- ☒ Admissions Policy for Deconcentration
- ☒ FY2003 Capital Fund Program Annual Statement
- ☐ Most recent board -approved operating budget (Required Attachment for PHAs that are troubled or at risk of being designated troubled ONLY)

#### Optional Attachments:

- ☐ PHA Management Organizational Chart
- ☒ FY2003 Capital Fund Program 5 Year Action Plan
- ☐ Public Housing Drug Elimination Program (PHDEP) Plan **(Program Eliminated by Congress)**
- ☐ Comments of Resident Advisory Board or Boards (must be attached if not included in PHA Plan text) **No Comments Received**
- ☒ Other (List below, providing each attachment name)

#### Pet Policy

#### Resident Survey Follow -up Plan

#### Resident Representation

#### Capital Fund Annual Statements

### Supporting Documents Available for Review

Indicate which documents are available for public review by placing a mark in the "Applicable & On Display" column in the appropriate rows. All listed documents must be on display if applicable to the program activities conducted by the PHA.

List of Supporting Documents Available for Review		
Applicable & On Display	Supporting Document	Applicable Plan Component
	PHA Plan Certifications of Compliance with the PHA Plans and Related Regulations	5 Year and Annual Plans
	State/Local Government Certification of Consistency with the Consolidated Plan	5 Year and Annual Plans
	Fair Housing Documentation:	5 Year and Annual Plans



<b>List of Supporting Documents Available for Review</b>		
<b>Applicable &amp; On Display</b>	<b>Supporting Document</b>	<b>Applicable Plan Component</b>
Yes	Records reflecting that the PHA has examined its programs or proposed programs, identified any impediments to fair housing choice in those programs, addressed or is addressing those impediments in a reasonable fashion in view of the resources available, and worked or is working with local jurisdiction to implement any of the jurisdictions' initiatives to affirmatively further fair housing that require the PHA's involvement.	
	Consolidated Plan for the jurisdiction/s in which the PHA is located (which includes the Analysis of Impediments to Fair Housing Choice (AI)) and any additional backup data to support statement of housing needs in the jurisdiction	Annual Plan: Housing Needs
	Most recent board -approved operating budget for the public housing program	Annual Plan: Financial Resources;
Yes	Public Housing Admissions and (Continued) Occupancy Policy (A&O), which includes the Tenant Selection and Assignment Plan [TSAP]	Annual Plan: Eligibility, Selection, and Admissions Policies
N/A	Section 8 Administrative Plan	Annual Plan: Eligibility, Selection, and Admissions Policies
Yes	Public Housing Deconcentration and Income Mixing Documentation: 1. PHA board certification of compliance with deconcentration requirements (section 16(a) of the US Housing Act of 1937, as implemented in the 2/18/99 <i>Quality Housing and Work Responsibility Act Initial Guidance</i> ; <i>Notice</i> and any further HUD guidance) and 2. Documentation of the required deconcentration and income mixing analysis	Annual Plan: Eligibility, Selection, and Admissions Policies
Yes	Public housing rent determination policies, including the methodology for setting public housing flat rents <input checked="" type="checkbox"/> check here if included in the public housing A&O Policy	Annual Plan: Rent Determination
Yes	Schedule of flat rents offered at each public housing development <input checked="" type="checkbox"/> check here if included in the public housing A&O Policy	Annual Plan: Rent Determination
N/A	Section 8 rent determination (payment standard) policies <input type="checkbox"/> check here if included in Section 8 Administrative Plan	Annual Plan: Rent Determination
Yes	Public housing management and maintenance policy documents, including policies for the prevention or eradication of pest infestation (including cockroach infestation)	Annual Plan: Operations and Maintenance
Yes	Public housing grievance procedures <input type="checkbox"/> check here if included in the public housing	Annual Plan: Grievance Procedures

<b>List of Supporting Documents Available for Review</b>		
<b>Applicable &amp; On Display</b>	<b>Supporting Document</b>	<b>Applicable Plan Component</b>
	A&O Policy	
N/A	Section 8 informal review and hearing procedures <input type="checkbox"/> check here if included in Section 8 Administrative Plan	Annual Plan: Grievance Procedures
Yes	The HUD - approved Capital Fund/Comprehensive Grant Program Annual Statement (HUD 52837) for the active grant year	Annual Plan: Capital Needs
N/A	Most recent CIAP Budget/Progress Report (HUD 52825) for any active CIAP grant	Annual Plan: Capital Needs
Yes	Most recent, approved 5 Year Action Plan for the Capital Fund/Comprehensive Grant Program, if not included as an attachment (provided at PHA option)	Annual Plan: Capital Needs
N/A	Approved HOPE VI applications or, if more recent, approved or submitted HOPE VI Revitalization Plans or any other approved proposal for development of public housing	Annual Plan: Capital Needs
N/A	Approved or submitted applications for demolition and/or disposition of public housing	Annual Plan: Demolition and Disposition
N/A	Approved or submitted applications for designation of public housing (Designated Housing Plans)	Annual Plan: Designation of Public Housing
Yes	Approved or submitted assessments of reasonable revitalization of public housing and approved or submitted conversion plans prepared pursuant to section 202 of the 1996 HUD Appropriations Act	Annual Plan: Conversion of Public Housing
N/A	Approved or submitted public housing home ownership programs/plans	Annual Plan: Homeownership
N/A	Policies governing any Section 8 Homeownership program <input type="checkbox"/> check here if included in the Section 8 Administrative Plan	Annual Plan: Homeownership
	Any cooperative agreement between the PHA and the TANF agency	Annual Plan: Community Service & Self - Sufficiency
N/A	FSS Action Plan/s for public housing and/or Section 8	Annual Plan: Community Service & Self - Sufficiency
	Most recent self - sufficiency (ED/SS, TOP or ROSS or other resident services grant) grant program reports	Annual Plan: Community Service & Self - Sufficiency
Program Eliminated By Congress	The most recent Public Housing Drug Elimination Program (PHDEP) semi - annual performance report for any open grant and most recently submitted PHDEP application (PHDEP Plan)	Annual Plan: Safety and Crime Prevention
	The most recent fiscal year audit of the PHA conducted under section 5(h)(2) of the U.S. Housing Act of 1937 (42 U.S.C. 1437c(h)), the results of that audit and the PHA's response to any findings	Annual Plan: Annual Audit
N/A	Troubled PHAs: MOA/ Recovery Plan	Troubled PHAs
	Other supporting documents (optional) (list individually; use as many lines as necessary)	(specify as needed)

## 1.Statement of Housing Needs

[24CFR Part 903.79(a)]

### A.Housing Needsof FamiliesintheJurisdiction/sServedbythePHA

Based upon the information contained in the Consolidated Plan/s applicable to the jurisdiction, and/or other data available to the PHA, provide a statement of the housing needs in the jurisdiction by completing the following table. In the "Overall" Needs column, provide the estimated number of renter families that have housing needs. For the remaining characteristics, rate the impact of that factor on the housing needs for each family type, from 1 to 5, with 1 being "no impact" and 5 being "severe impact." Use N/A to indicate that no information is available upon which the PHA can make this assessment.

Housing Needsof FamiliesintheJurisdiction by Family Type							
Family Type	Overall	Afford- ability	Supply	Quality	Access- ibility	Size	Loca- tion
Income ≤ 30% of AMI	550	5	2	5	3	1	2
Income > 30% but ≤ 50% of AMI	381	5	2	5	3	1	3
Income > 50% but < 80% of AMI	259	5	2	5	3	1	4
Elderly	436	5	2	5	3	1	3
Families with Disabilities	N/A						
Race/Ethnicity <b>White/Caucasian</b>	1,100	5	2	5	3	1	4
Race/Ethnicity <b>Black/Afr.Am.</b>	776	5	2	5	3	1	4
Race/Ethnicity <b>Hispanic</b>	N/A*						
Race/Ethnicity							

\*We have found no documented needs for Hispanics, however anecdotal information suggests that a need exists.

What sources of information did the PHA use to conduct this analysis? (Check all that apply; all materials must be made available for public inspection.)

- ☐ Consolidated Plan of the Jurisdiction/s  
Indicate year:
- ☒ U.S. Census data: the Comprehensive Housing Affordability Strategy ("CHAS") dataset **1990 Table 1C, 2000 data still not available.**
- ☐ American Housing Survey data  
Indicate year:
- ☐ Other housing market study

Indicate year:  
☐ Other sources: (list and indicate year of information)

## B. Housing Need of Families on the Public Housing and Section 8 Tenant-Based Assistance Waiting Lists

State the housing need of the families on the PHA's waiting list/s. **Complete one table for each type of PHA - wide waiting list administered by the PHA.** PHA may provide separate tables for site-based or sub-jurisdictional public housing waiting lists at their option.

Housing Need of Families on the Waiting List			
Waiting list type: (select one)			
<input type="checkbox"/> Section 8 tenant-based assistance			
<input checked="" type="checkbox"/> Public Housing (as of 12-18-2001)			
<input type="checkbox"/> Combined Section 8 and Public Housing			
<input type="checkbox"/> Public Housing Site-Based or sub-jurisdictional waiting list (optional)			
If used, identify which development/subjurisdiction:			
	# of families	% of total families	Annual Turnover
Waiting list total	178		21.5%
Extremely low income <= 30% AMI	143	80%	
Very low income (> 30% but <= 50% AMI)	33	19%	
Low income (> 50% but < 80% AMI)	2	1%	
Families with children	104	58%	
Elderly families	11	6%	
Families with Disabilities	12	7%	
Race/ethnicity: <b>White/Caucasian</b>	46	26%	
Race/ethnicity: <b>Black/Afr. Am.</b>	131	74%	
Race/ethnicity: <b>Hispanic</b>	0	0%	
Race/ethnicity: <b>Other</b>	1	> 0%	

Housing Needsof FamiliesontheWaitingList			
Characteristicsby BedroomSize (PublicHousing Only)			
1BR	74	42%	
2BR	64	36%	
3BR	33	18%	
4BR	6	3%	
5BR	1	1%	
5+BR	0	0%	
Isthewaitinglistclosed(selectone)? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Ifyes: Howlonghasitbeenenclosed(#ofmonths)? DoesthePHAexpecttoreopenthelistinthePHAPlanyear? <input type="checkbox"/> No <input type="checkbox"/> Yes DoesthePHApermitspecificcategoriesoffamiliesontothewaitinglist,evenif generallyclosed? <input type="checkbox"/> No <input type="checkbox"/> Yes			

### C.StrategyforAddressingNeeds

ProvideabriefdescriptionofthePHA'sstrategyforaddressingthehousingneedsoffamiliesinthe jurisdictionandonthe waitinglist **INTHEUPCOMINGYEAR** ,andtheAgency'sreasonsfor choosingthisstrategy.

#### (1)Strategies

**Need:Shortageofaffordablehousingforalleligiblepopulations**

**Strategy1.MaximizethenumberofaffordableunitsavailabletothePHAwithin itscurrentresourcesby:**

Selectallthatapply

- ☒ Employeffectivemaintenanceandmanagementpoliciestominimizethe numberofpublichousingunitsoff -line
- ☒ Reduceturnovertimeforvacatedpublichousingunits
- ☐ Reducetimetorenovatepublichousingunits
- ☐ Seekreplacementofpublichousingunitslosttotheinventorythroughmixed financedevelopment
- ☐ Seekreplacementofpublichousingunitslosttotheinventorythroughsection 8replacementhousingresources
- ☐ Maintainorincreasesection8lease -upratesbyestablishingpaymentstandards thatwillenablefamieliestorentthroughoutthejurisdiction

- ☐ Undertakemeasurestoensureaccesstoaffordablehousingamongfamilies assistedbythePHA,regardlessofunitsizerequired
- ☐ Maintainorincreasesection8lease -upratesbymarketingtheprogramto owners,particularlythoseoutsideofareasofminorityandpoverty concentration
- ☐ Maintainorincreasesection8lease -upratesbyeffectivelyscreeningSection8 applicantstoincreaseowneracceptanceofprogram
- ☐ ParticipateintheConsolidatedPlandevelopmentprocesstoensure coordinationwithbroadercommunitystrategies
- ☐ Other(listbelow)

### **Strategy2:Increasethenumberofaffordablehousingunitsby:**

Selectallthatapply

- ☐ Applyforadditionalsection8unitsshouldtheybecomeavailable
- ☐ Leverageaffordablehousingresourcesinthecommunitythroughthecreation ofmixed -financehousing
- ☐ PursuehousingresourcesotherthanpublichousingorSection8tenant -based assistance.
- ☐ Other:(listbelow)

### **Need:SpecificFamilyTypes:Familiesatorbelow30%ofmedian**

#### **Strategy1:Targetavailableassistancetofamiliesatorbelow30%ofAMI**

Selectallthatapply

- ☐ ExceedHUDfederaltargetingrequirementsforfamiliesatorbelow30%of AMIinpublichousing
- ☐ ExceedHUDfederaltargetingrequirementsforfamiliesatorbelow30%of AMIintenant -basedsection8assistance
- ☐ Employadmissionspreferencesaimedatfamilieswiththeeconomichardships
- ☐ Adoptrentpoliciesupportandencouragework
- ☐ Other:(listbelow)

### **Need:SpecificFamilyTypes:Familiesatorbelow50%ofmedian**

#### **Strategy1:Targetavailableassistanceto familiesatorbelow50%ofAMI**

Selectallthatapply

- ☐ Employadmissionspreferencesaimedatfamilieswhoareworking
- ☐ Adoptrentpoliciesupportandencouragework
- ☐ Other:(listbelow)

### **Need:SpecificFamilyTypes:TheElderly**

#### **Strategy1: Targetavailableassistancetotheelderly:**

Selectallthatapply

- ☐ Seekdesignationofpublichousingfortheelderly
- ☐ Applyforspecial -purposevoucherstargetedtotheelderly,shouldtheybecome available
- ☐ Other:(listbelow)

### **Need:SpecificFamilyTypes:FamilieswithDisabilities**

#### **Strategy1: TargetavailableassistancetoFamilieswithDisabilities:**

Selectallthatapply

- ☐ Seekdesignationofpublichousingforfamilies withdisabilities
- ☐ Carryoutthemodificationsneededinpublichousingbasedonthesection504 NeedsAssessmentforPublicHousing
- ☐ Applyforspecial -purposevoucherstargetedtofamilieswithdisabilities, shouldtheybecomeavailable
- ☐ Affirmativelymarkettolocalnon -profitagenciesthatassistfamilieswith disabilities
- ☐ Other:(listbelow)

### **Need:SpecificFamilyTypes:Racesorethnicitieswithdisproportionatehousing needs**

#### **Strategy1:IncreaseawarenessofPHAresourcesamongfamiliesofracesand ethnicitieswithdisproportionateneeds:**

Selectifapplicable

- ☐ Affirmativelymarkettoraces/ethnicitiesshowntohavedisproportionate housingneeds
- ☐ Other:(listbelow)

#### **Strategy2:Conductactivitiestoaffirmativelyfurtherfairhousing**

Selectallthatapply

- ☐ Counselsection8tenantsastolocationofunitsoutsideofareasofpovertyor minorityconcentrationandassistthem tolocatethoseunits
- ☐ Marketthesection8programtoownersoutsideofareasofpoverty/minority concentrations
- ☐ Other:(listbelow)

**Other Housing Needs & Strategies: (list needs and strategies below)**

**(2) Reasons for Selecting Strategies**

Of the factors listed below, select all that influenced the PHA's selection of the strategies it will pursue:

- ☐ Funding constraints
- ☐ Staffing constraints
- ☐ Limited availability of sites for assisted housing
- ☒ Extent to which particular housing needs are met by other organizations in the community **Section 8 program is administered exclusively by the State Housing Authority**
- ☐ Evidence of housing needs as demonstrated in the Consolidated Plan and other information available to the PHA
- ☐ Influence of the housing market on PHA programs
- ☐ Community priorities regarding housing assistance
- ☐ Results of consultation with local or state government
- ☐ Results of consultation with residents and the Resident Advisory Board
- ☐ Results of consultation with advocacy groups
- ☐ Other: (list below)

**2. Statement of Financial Resources**

[24CFR Part 903.79(b)]

List the financial resources that are anticipated to be available to the PHA for the support of Federal public housing and tenant-based Section 8 assistance programs administered by the PHA during the Plan year. Note: the table assumes that Federal public housing or tenant-based Section 8 assistance grant funds are expended on eligible purposes; therefore, uses of these funds need not be stated. For other funds, indicate the use for those funds as one of the following categories: public housing operations, public housing capital improvements, public housing safety/security, public housing supportive services, Section 8 tenant-based assistance, Section 8 supportive services or other.

<b>Financial Resources: Planned Sources and Uses</b>		
<b>Sources</b>	<b>Planned \$</b>	<b>Planned Uses</b>
<b>1. Federal Grants (FY 2002 grants)</b>		
a) Public Housing Operating Fund	\$676,059	
b) Public Housing Capital Fund	\$446,185	
c) HOPE VI Revitalization		
d) HOPE VI Demolition		
e) Annual Contributions for Section 8 Tenant-Based Assistance		
f) Public Housing Drug Elimination Program (including any Technical Assistance funds)	-0-	



<b>Financial Resources: Planned Sources and Uses</b>		
<b>Sources</b>	<b>Planned \$</b>	<b>Planned Uses</b>
g) Resident Opportunity and Self-Sufficiency Grants		
h) Community Development Block Grant		
i) HOME		
Other Federal Grants (list below)		
<b>2. Prior Year Federal Grants (unobligated funds only) (list below)</b>		
<b>3. Public Housing Dwelling Rental Income</b>	\$474,952	PHA Operations
<b>4. Other income</b> excess utilities	\$3,750	PHA Operations
investments	\$28,180	PHA Operations
misc.	\$19,000	PHA Operations
<b>4. Non-federal sources (list below)</b>		
<b>Total resources</b>	<b>\$1,648,126.00</b>	

### **3. PHA Policies Governing Eligibility, Selection, and Admissions**

[24 CFR Part 903.79 (c)]

#### **A. Public Housing**

Exemptions: PHAs that do not administer public housing are not required to complete subcomponent 3A.

##### **(1) Eligibility**

a. When does the PHA verify eligibility for admission to public housing? (select all that apply)

- ☐ When families are within a certain number of being offered a unit: (state number)
- ☐ When families are within a certain time of being offered a unit: (state time)
- ☒ Other: (describe) **When an appropriate size unit is ready or near ready for occupancy.**

b. Which non-income (screening) factors does the PHA use to establish eligibility for admission to public housing (select all that apply)?

- ☒ Criminal or Drug-related activity
- ☒ Rental history
- ☒ Housekeeping
- ☐ Other (describe)

c. ☒ Yes ☐ No: Does the PHA request criminal records from local law enforcement agencies for screening purposes?

d. ☒ Yes ☐ No: Does the PHA request criminal records from State law enforcement agencies for screening purposes?

e. ☐ Yes ☒ No: Does the PHA access FBI criminal records from the FBI for screening purposes? (either directly or through an NCIC - authorized source)

## **(2) Waiting List Organization**

a. Which methods does the PHA plan to use to organize its public housing waiting list (select all that apply)

- ☒ Community-wide list
- ☐ Sub-jurisdictional lists
- ☐ Site-based waiting lists
- ☐ Other (describe)

b. Where may interested persons apply for admission to public housing?

- ☒ PHA main administrative office
- ☐ PHA development/site management office
- ☐ Other (list below)

c. If the PHA plan to operate one or more site-based waiting lists in the coming year, answer each of the following questions; if not, skip to subsection **(3) Assignment**

1. How many site-based waiting lists will the PHA operate in the coming year?

2. ☐ Yes ☐ No: Are any or all of the PHA's site-based waiting lists new for the upcoming year (that is, they are not part of a previously approved site-based waiting list plan)? If yes, how many lists?
3. ☐ Yes ☐ No: May families be on more than one list simultaneously? If yes, how many lists?
4. Where can interested persons obtain more information about and sign up to be on the site-based waiting lists (select all that apply)?
- ☐ PHA main administrative office
  - ☐ All PHA development management offices
  - ☐ Management offices at developments with site-based waiting lists
  - ☐ At the development to which they would like to apply
  - ☐ Other (list below)

### **(3) Assignment**

- a. How many vacant unit choices are applicants ordinarily given before they fall to the bottom of the list and are removed from the waiting list? (select one)
- ☐ One
  - ☒ Two
  - ☐ Three or More
- b. ☒ Yes ☐ No: Is this policy consistent across all waiting list types?
- c. If answer to b is no, list variations for any other than the primary public housing waiting list/s for the PHA:

### **(4) Admissions Preferences**

- a. Income targeting:
- ☐ Yes ☒ No: Does the PHA plan to exceed the federal targeting requirements by targeting more than 40% of all new admissions to public housing to families at or below 30% of median area income?
- b. Transfer policies:
- In what circumstances will transfer take precedence over new admissions? (list below)
- ☒ Emergencies
  - ☒ Overhoused
  - ☒ Underhoused

- ☒ Medical justification
- ☒ Administrative reasons determined by the PHA (e.g., to permit modernization work)
- ☐ Resident choice: (state circumstances below)
- ☐ Other: (list below)

c. Preferences

1. ☒ Yes ☐ No: Has the PHA established preferences for admission to public housing (other than date and time of application)? (If "no" is selected, skip to subsection **(5) Occupancy**)
2. Which of the following admission preferences does the PHA plan to employ in the coming year? (select all that apply from either former Federal preferences or other preferences)

Former Federal preferences:

- ☐ Involuntary Displacement (Disaster, Government Action, Action of Housing Owner, Inaccessibility, Property Disposition)
- ☐ Victims of domestic violence
- ☐ Substandard housing
- ☐ Homelessness
- ☐ High rent burden (rent is > 50 percent of income)

Other preferences: (select below)

- ☐ Working families and those unable to work because of age or disability
- ☐ Veterans and veterans' families
- ☐ Residents who live and/or work in the jurisdiction
- ☐ Those enrolled currently in educational, training, or upward mobility programs
- ☐ Households that contribute to meeting income goals (broad range of incomes)
- ☐ Households that contribute to meeting income requirements (targeting)
- ☐ Those previously enrolled in educational, training, or upward mobility programs
- ☐ Victims of reprisals or hate crimes
- ☒ Other preference(s) (list below)

**Elderly over non-elderly singles for 1BR units**

3. If the PHA will employ admissions preferences, please prioritize by placing a "1" in the space that represents your first priority, a "2" in the box representing your second priority, and so on. If you give equal weight to one or more of these choices (either through an absolute hierarchy or through a points system), place the same number next to each. That means you can use "1" more than once, "2" more than once, etc.

2 Date and Time

Former Federal preferences:

Involuntary Displacement (Disaster, Government Action, Action of Housing Owner, Inaccessibility, Property Disposition)  
Victims of domestic violence  
Substandard housing  
Homelessness  
High rent burden

Other preferences (select all that apply)

- ☐ Working families and those unable to work because of age or disability
- ☐ Veterans and veterans' families
- ☐ Residents who live and/or work in the jurisdiction
- ☐ Those enrolled currently in educational, training, or upward mobility programs
- ☐ Household that contributes to meeting income goals (broad range of incomes)
- ☐ Household that contributes to meeting income requirements (targeting)
- ☐ Those previously enrolled in educational, training, or upward mobility programs
- ☐ Victims of reprisals or hate crimes
- ☒ Other preference(s) (list below)

**#1 Elderly over non-elderly singles for 1 BR units**

4. Relationship of preferences to income targeting requirements:

- ☐ The PHA applies preferences within income tiers
- ☒ Not applicable: the pool of applicant families ensures that the PHA will meet income targeting requirements

**(5) Occupancy**

a. What reference materials can applicants and residents use to obtain information about the rules of occupancy of public housing (select all that apply)

- ☒ The PHA - resident lease
- ☒ The PHA's Admissions and (Continued) Occupancy policy
- ☒ PHA briefing seminars or written materials **Resident Handbook, Initial Occupancy Orientation, Resident Advisory Council Meetings, Issue - Oriented Publications by PHA**
- ☐ Other source (list)

b. How often must residents notify the PHA of changes in family composition? (select all that apply)

- ☒ At an annual reexamination and lease renewal

- ☒ Anytime family composition changes
- ☒ At family request for revision
- ☐ Other (list)

**(6) Deconcentration and Income Mixing**

a. ☐ Yes ☒ No: Did the PHA's analysis of its family (general occupancy) development(s) to determine concentration of poverty indicate the need for measures to promote deconcentration of poverty or income mixing?

b. ☐ Yes ☒ No: Did the PHA adopt any change(s) to its **admissions policies** based on the results of the required analysis of the need to promote deconcentration of poverty or to assure income mixing?

**Note:** PHA made change(s) to its admission policy to comply with CFR 903.2(c)(1) (iii) as amended.

c. If the answer to b was yes, what changes were adopted? (select all that apply)

- ☐ Adoption of site -based waiting lists  
If selected, list targeted developments below:
- ☐ Employing waiting list "skipping" to achieve deconcentration of poverty or income mixing goals at targeted developments  
If selected, list targeted developments below:
- ☐ Employing new admission preferences at targeted developments  
If selected, list targeted developments below:
- ☐ Other (list policies and development(s) targeted below)

**The average income of all sites are below the Extremely Low Income limit**

d. ☐ Yes ☒ No: Did the PHA adopt any change(s) to its **other policies** based on the results of the required analysis of the need for deconcentration of poverty and income mixing?

e. If the answer to d was yes, how would you describe these changes? (select all that apply)

- ☐ Additional affirmative marketing

- ☐ Actionstoimprovethe marketabilityofcertaindevelopments
- ☐ Adoptionoradjustmentofceilingrentsforcertaindevelopments
- ☐ Adoptionofrentincentivestoencourage deconcentrationofpovertyand income-mixing
- ☐ Other(listbelow)

f. Basedontheresultsoftherequiredanalysis,inwhichdevelopmentswillthePHA makespecial effortsto attractorretainhigher -incomefamilies?(selectallthatapply)

- ☒ Notapplicable:resultsofanalysisdidnotindicateaneedforsuchefforts
- ☐ List(anyapplicable)developmentsbelow:

g. Basedontheresultsoftherequiredanalysis,inwhichdevelopmentswillthePHA makespecial effortsto assureaccessforlower -incomefamilies? (selectallthatapply)

- ☒ Notapplicable:resultsofanalysisdidnotindicateaneedforsuchefforts
- ☐ List(anyapplicable)developmentsbelow:

## **B. Section 8 (THIS AUTHORITY HAS NO SECTION 8)**

Exemptions: PHA that do not administer section 8 are not required to complete sub -component 3B. Unless otherwise specified, all questions in this section apply only to the tenant -based section 8 assistance program (vouchers, and until completely merged into the voucher program , certificates).

### **(1) Eligibility**

a. What is the extent of screening conducted by the PHA? (select all that apply)

- ☐ Criminal or drug -related activity only to the extent required by law or regulation
- ☐ Criminal and drug -related activity, more extensively than required by law or regulation
- ☐ More general screening than criminal and drug -related activity (list factors below)
- ☐ Other (list below)

b. ☐ Yes ☐ No: Does the PHA request criminal records from local law enforcement agencies for screening purposes?

c. ☐ Yes ☐ No: Does the PHA request criminal records from State law enforcement agencies for screening purposes?

d. ☐ Yes ☐ No: Does the PHA access FBI criminal records from the FBI for screening purposes? (either directly or through an NCIC - authorized source)

e. Indicate what kinds of information you share with prospective landlords? (select all that apply)

- ☐ Criminal or drug -related activity  
☐ Other (describe below)

## **(2) Waiting List Organization**

a. With which of the following program waiting lists is the section 8 tenant -based assistance waiting list merged? (select all that apply)

- ☐ None  
☐ Federal public housing  
☐ Federal moderate rehabilitation  
☐ Federal project -based certificate program  
☐ Other federal or local program (list below)

b. Where may interested persons apply for admission to section 8 tenant -based assistance? (select all that apply)

- ☐ PHA main administrative office  
☐ Other (list below)

## **(3) Search Time**

a. ☐ Yes ☐ No: Does the PHA give extensions on standard 60 -day period to search for a unit?

If yes, state circumstances below:

## **(4) Admissions Preferences**

a. Income targeting

- ☐ Yes ☐ No: Does the PHA plan to exceed the federal targeting requirements by targeting more than 75% of all new admissions to the section 8 program to families at or below 30% of median area income?

b. Preferences

1. ☐ Yes ☐ No: Has the PHA established preferences for admission to section 8 tenant-based assistance? (other than date and time of application) (if no, skip to subcomponent **(5) Special purpose section 8 assistance programs**)



2. Which of the following admission preferences does the PHA plan to employ in the coming year? (select all that apply from either former Federal preferences or other preferences)

Former Federal preferences

- ☐ Involuntary Displacement (Disaster, Government Action, Action of Housing Owner, Inaccessibility, Property Disposition)
- ☐ Victims of domestic violence
- ☐ Substandard housing
- ☐ Homelessness
- ☐ High rent burden (rent is > 50 percent of income)

Other preferences (select all that apply)

- ☐ Working families and those unable to work because of age or disability
- ☐ Veterans and veterans' families
- ☐ Residents who live and/or work in your jurisdiction
- ☐ Those enrolled currently in educational, training, or upward mobility programs
- ☐ Households that contribute to meeting income goals (broad range of incomes)
- ☐ Households that contribute to meeting income requirements (targeting)
- ☐ Those previously enrolled in educational, training, or upward mobility programs
- ☐ Victims of reprisals or hate crimes
- ☐ Other preference(s) (list below)

3. If the PHA will employ admissions preferences, please prioritize by placing a "1" in the space that represents your first priority, a "2" in the box representing your second priority, and so on. If you give equal weight to one or more of these choices (either through an absolute hierarchy or through a point system), place the same number next to each. That means you can use "1" more than once, "2" more than once, etc.

Date and Time

Former Federal preferences

- Involuntary Displacement (Disaster, Government Action, Action of Housing Owner, Inaccessibility, Property Disposition)
- Victims of domestic violence
- Substandard housing
- Homelessness
- High rent burden

Other preferences (select all that apply)

- ☐ Working families and those unable to work because of age or disability
- ☐ Veterans and veterans' families

- ☐ Residents who live and/or work in your jurisdiction
- ☐ Those enrolled currently in educational, training, or upward mobility programs
- ☐ Households that contribute to meeting income goals (broad range of incomes)
- ☐ Households that contribute to meeting income requirements (targeting)
- ☐ Those previously enrolled in educational, training, or upward mobility programs
- ☐ Victims of reprisals or hate crimes
- ☐ Other preference(s) (list below)

4. Among applicants on the waiting list with the equal preference status, how are applicants selected? (select one)

- ☐ Date and time of application
- ☐ Drawing (lottery) or other random choice technique

5. If the PHA plans to employ preferences for “residents who live and/or work in the jurisdiction” (select one)

- ☐ This preference has previously been reviewed and approved by HUD
- ☐ The PHA requests approval for this preference through this PHA Plan

6. Relationship of preference to income targeting requirements: (select one)

- ☐ The PHA applies preferences within income tiers
- ☐ Not applicable: the pool of applicant families ensures that the PHA will meet income targeting requirements

#### **(5) Special Purpose Section 8 Assistance Programs**

a. In which documents or other reference materials are the policies governing eligibility, selection, and admission to any special -purpose section 8 program administered by the PHA contained? (select all that apply)

- ☐ The Section 8 Administrative Plan
- ☐ Briefing sessions and written materials
- ☐ Other (list below)

b. How does the PHA announce the availability of any special -purpose section 8 program to the public?

- ☐ Through published notices
- ☐ Other (list below)

## **4.PHARentDeterminationPolicies**

[24CFRPart903.79(d)]

### **A.PublicHousing**

Exemptions:PHAsthatdonotadministerpublichousingarenotrequiredto completesub -component 4A.

#### **(1)IncomeBasedRentPolicies**

Describe the PHA's income based rent setting policy/ies for public housing using, including discretionary (that is, not required by statute or regulation) income disregards and exclusions, in the appropriate spaces below.

a. Use of discretionary policies: (select one)

☒ The PHA will not employ any discretionary rent -setting policies for income based rent in public housing. Income -based rents are set at the higher of 30% of adjusted monthly income, 10% of unadjusted monthly income, the welfare rent, or minimum rent (less HUD mandatory deductions and exclusions). (If selected, skip to sub -component (2))

---or---

☐ The PHA employs discretionary policies for determining income based rent (If selected, continue to question b.)

b. Minimum Rent

1. What amount best reflects the PHA's minimum rent? (select one)

- ☐ \$0  
☐ \$1-\$25  
☒ \$26-\$50

2. ☐ Yes ☒ No: Has the PHA adopted any discretionary minimum rent hardship exemption policies?

3. If yes to question 2, list these policies below :

c. Rents set at less than 30% than adjusted income

1. ☒ Yes ☐ No: Does the PHA plan to charge rents at a fixed amount or percentage less than 30% of adjusted income?

2. If yes to above, list the amounts or percentages charged and the circumstances under which these will be used below:

**The Authority will offer "Choice of Rents" as required by Federal Regulations, which will result in some families who choose ceiling or flat rents paying less than 30%.**

d. Which of the discretionary (optional) deductions and/or exclusion policies does the PHA plan to employ (select all that apply)

☐ For the earned income of a previously unemployed household member

☐ For increases in earned income

☐ Fixed amount (other than general rent -setting policy)  
If yes, state amount/s and circumstances below:

☐ Fixed percentage (other than general rent -setting policy)  
If yes, state percentage/s and circumstances below:

☐ For household heads

☐ For other family members

☐ For transportation expenses

☐ For the non-reimbursed medical expenses of non-disabled or non-elderly families

☐ Other (describe below)

e. Ceiling rents

1. Do you have ceiling rents? (rents set at a level lower than 30% of adjusted income) (select one)

☒ Yes for all developments

☐ Yes but only for some developments

☐ No

2. For which kinds of developments are ceiling rents in place? (select all that apply)

☒ For all developments

☐ For all general occupancy developments (not elderly or disabled or elderly only)

- ☐ For specified general occupancy developments
- ☐ For certain parts of developments; e.g., the high-rise portion
- ☐ For certain size units; e.g., larger bedroom sizes
- ☐ Other (list below)

3. Select the space or spaces that best describe how you arrive at ceiling rents (select all that apply)

- ☒ Market comparability study **Adopted 2-18-1998**
- ☐ Fair market rents (FMR)
- ☐ 95<sup>th</sup> percentile rents
- ☐ 75 percent of operating costs
- ☐ 100 percent of operating costs for general occupancy (family) developments
- ☐ Operating costs plus debt service
- ☐ The "rental value" of the unit
- ☐ Other (list below)

f. Rent re-determinations:

1. Between income reexaminations, how often must tenants report changes in income or family composition to the PHA such that the changes result in an adjustment to rent? (select all that apply)

- ☐ Never
- ☐ At family option
- ☐ Anytime the family experiences an income increase
- ☒ Anytime a family experiences an income increase above a threshold amount or percentage: (if selected, specify threshold) **\$600/Yr.**
- ☐ Other (list below)

g. ☐ Yes ☒ No: Does the PHA plan to implement individual savings accounts for residents (ISAs) as an alternative to the currently required 12-month disallowance of earned income and phasing in of rent increases in the next year?

## **(2) Flat Rents**

1. In setting the market-based flat rents, what sources of information did the PHA use to establish comparability? (select all that apply.)

- ☐ The section 8 rent reasonableness study of comparable housing
- ☐ Survey of rents listed in local newspaper

- ☒ Survey of similar unassisted units in the neighborhood  
☐ Other (list/desc ribe below)

## B. Section 8 Tenant -Based Assistance

Exemptions: PHA that do not administer Section 8 tenant -based assistance are not required to complete sub -component 4B. **Unless otherwise specified, all questions in this section apply only to the tenant -based section 8 assistance program (vouchers, and until completely merged into the voucher program, certificates).**

### (1) Payment Standards

Describe the voucher payment standards and policies .

a. What is the PHA's payment standard? (select the category that best describes your standard)

- ☐ At or above 90% but below 100% of FMR  
☐ 100% of FMR  
☐ Above 100% but at or below 110% of FMR  
☐ Above 110% of FMR (if HUD approved; describe circumstances below)

b. If the payment standard is lower than FMR, why has the PHA selected this standard? (select all that apply)

- ☐ FMRs are adequate to ensure success among assisted families in the PHA's segment of the FMR area  
☐ The PHA has chosen to serve additional families by lowering the payment standard  
☐ Reflects market or submarket  
☐ Other (list below)

c. If the payment standard is higher than FMR, why has the PHA chosen this level? (select all that apply)

- ☐ FMRs are not adequate to ensure success among assisted families in the PHA's segment of the FMR area  
☐ Reflects market or submarket  
☐ To increase housing options for families  
☐ Other (list below)

d. How often are payment standards reevaluated for adequacy? (select one)

- ☐ Annually  
☐ Other (list below)

e. What factors will the PHA consider in its assessment of the adequacy of its payment standard? (select all that apply)

- ☐ Success rates of assisted families  
☐ Rent burdens of assisted families  
☐ Other (list below)

## **(2) Minimum Rent**

a. What amount best reflects the PHA's minimum rent? (select one)

- ☐ \$0  
☐ \$1-\$25  
☐ \$26-\$50

b. ☐ Yes ☐ No: Has the PHA adopted any discretionary minimum rent hardship exemption policies? (if yes, list below)

## **5. Operations and Management (High Performer)**

[24 CFR Part 903.79(e)]

Exemptions from Component 5: High performing and small PHAs are not required to complete this section. Section 8 only PHAs must complete parts A, B, and C(2)

### **A. PHA Management Structure**

Describe the PHA's management structure and organization.

(select one)

- ☐ An organization chart showing the PHA's management structure and organization is attached.  
☐ A brief description of the management structure and organization of the PHA follows:

### **B. HUD Programs Under PHA Management**

— List Federal programs administered by the PHA, number of families served at the beginning of the upcoming fiscal year, and expected turnover in each. (Use "NA" to indicate that the PHA does not operate any of the programs listed below.)

Program Name	Units or Families Served at Year Beginning	Expected Turnover
Public Housing		
Section 8 Vouchers		
Section 8 Certificates		

Section 8 Mod Rehab		
Special Purpose Section 8 Certificates/Vouchers (list individually)		
Public Housing Drug Elimination Program (PHDEP)		
Other Federal Programs (list individually)		

### **C. Management and Maintenance Policies**

List the PHA's public housing management and maintenance policy documents, manuals, and handbooks that contain the Agency's rules, standards, and policies that govern maintenance and management of public housing, including a description of any measures necessary for the prevention or eradication of pest infestation (which includes cockroach infestation) and the policies governing Section 8 management.

(1) Public Housing Maintenance and Management: (list below)

(2) Section 8 Management: (list below)

## **6. PHA Grievance Procedures (High Performer)**

[24 CFR Part 903.79(f)]

Exemptions from component 6: High performing PHAs are not required to complete component 6. Section 8 - Only PHAs are exempt from sub-component 6A.

### **A. Public Housing**

1. ☐ Yes ☐ No: Has the PHA established any written grievance procedures in addition to federal requirements found at 24 CFR Part 966, Subpart B, for residents of public housing?

If yes, list additions to federal requirements below:

2. Which PHA offices should residents or applicants to public housing contact to initiate the PHA grievance process? (select all that apply)



- ☐ PHA main administrative office
- ☐ PHA development management offices
- ☐ Other (list below)

### **B. Section 8 Tenant -Based Assistance**

1. ☐ Yes ☐ No: Has the PHA established informal review procedures for applicants to the Section 8 tenant -based assistance program and informal hearing procedures for families assisted by the Section 8 tenant -based assistance program in addition to federal requirements found at 24 CFR 982?

If yes, list addition to federal requirements below:

2. Which PHA offices should applicants or assisted families contact to initiate the informal review and informal hearing processes? (select all that apply)

- ☐ PHA main administrative office
- ☐ Other (list below)

## **7. Capital Improvement Needs**

[24 CFR Part 903.79(g)]

Exemptions from Component 7: Section 8 only PHAs are not required to complete this component and may skip to Component 8.

### **A. Capital Fund Activities**

Exemptions from sub -component 7A: PHAs that will not participate in the Capital Fund Program may skip to component 7B. All other PHAs must complete 7A as instructed.

### **(1) Capital Fund Program Annual Statement**

Using parts I, II, and III of the Annual Statement for the Capital Fund Program (CFP), identify capital activities the PHA is proposing for the upcoming year to ensure long -term physical and social viability of its public housing developments. This statement can be completed by using the CFP Annual Statement tables provided in the table library at the end of the PHA Plan template **OR**, at the PHA's option, by completing and attaching a properly updated HUD -52837.

Select one:

- ☐ The Capital Fund Program Annual Statement is provided as an attachment to the PHA Plan at Attachment (state name)

-or-

- ☒ The Capital Fund Program Annual Statement is provided below: (if selected, copy the CFP Annual Statement from the eTable Library and insert there)
- Capital Fund Annual Statements for FFY 2001 & 2002 are found at the end of the plan. Final Statement for FFY 2000 is also included.**

**(2) Optional 5 -Year Action Plan**

Agencies are encouraged to include a 5 -Year Action Plan covering capital work items. This statement can be completed by using the 5 Year Action Plan table provided in the table library at the end of the PHA Plan template. **OR** by completing and attaching a properly updated HUD -52834.

- a. ☒ Yes ☐ No: Is the PHA providing an optional 5 -Year Action Plan for the Capital Fund? (if no, skip to sub -component 7B)

b. If yes to question a, select one:

- ☐ The Capital Fund Program 5 -Year Action Plan is provided as an attachment to the PHA Plan at Attachment (state name

-or-

- ☒ The Capital Fund Program 5 -Year Action Plan is provided below: (if selected, copy the CFP Optional 5 Year Action Plan from the Table Library and insert here)

**Our Capital Fund Program 5 -Year Plan is found at the end of the plan.**

**B. HOPE VI and Public Housing Development and Replacement Activities (Non -Capital Fund)**

Applicability of sub -component 7B: All PHAs administering public housing. Identify any approved HOPE VI and/or public housing development or replacement activities not described in the Capital Fund Program Annual Statement.

- ☐ Yes ☒ No: a) Has the PHA received a HOPE VI revitalization grant? (if no, skip to question c; if yes, provide responses to question b for each grant, copying and completing as many times as necessary)
- b) Status of HOPE VI revitalization grant (complete one set of questions for each grant)

1. Development name:

2. Development (project) number:

3. Status of grant: (select the statement that best describes the current status)

- ☐ Revitalization Plan under development

- ☐ Revitalization Plans submitted, pending approval
- ☐ Revitalization Plan approved
- ☐ Activities pursuant to an approved Revitalization Plan underway

☐ Yes ☒ No: c) Does the PHA plan to apply for a HOPE VI Revitalization grant in the Plan year?  
If yes, list development name/s below:

☐ Yes ☒ No: d) Will the PHA be engaging in any mixed -financed development activities for public housing in the Plan year?  
If yes, list developments or activities below:

☐ Yes ☒ No: e) Will the PHA be conducting any other public housing development or replacement activities not discussed in the Capital Fund Program Annual Statement?  
If yes, list developments or activities below:

## **8. Demolition and Disposition**

[24 CFR Part 903.79(h)]

Applicability of component 8: Section 8 only PHAs are not required to complete this section.

1. ☐ Yes ☒ No: Does the PHA plan to conduct any demolition or disposition activities (pursuant to section 18 of the U.S. Housing Act of 1937 (42 U.S.C. 1437p)) in the plan Fiscal Year? (If "No", skip to component 9; if "yes", complete one activity description for each development.)

### 2. Activity Description

☐ Yes ☐ No: Has the PHA provided the activities description information in the **optional** Public Housing Asset Management Table? (If "yes", skip to component 9. If "No", complete the Activity Description table below.)

<b>Demolition/Disposition Activity Description</b>
1a. Development name:
1b. Development (project) number:
2. Activity type: Demolition <input type="checkbox"/> Disposition <input type="checkbox"/>
3. Application status (select one) Approved <input type="checkbox"/>

Submitted, pending approval <input type="checkbox"/>
Planned application <input type="checkbox"/>
4. Date application approved, submitted, or planned for submission: (DD/MM/YY)
5. Number of units affected:
6. Coverage of action (select one)
<input type="checkbox"/> Part of the development
<input type="checkbox"/> Total development
7. Timeline for activity:
a. Actual or projected start date of activity:
b. Projected end date of activity:

## **9. Designation of Public Housing for Occupancy by Elderly Families or Families with Disabilities or Elderly Families and Families with Disabilities**

[24CFR Part 903.79(i)]

Exemptions from Component 9; Section 8 only PHAs are not required to complete this section.

1. ☐ Yes ☒ No: Has the PHA designated or applied for approval to designate or does the PHA plan to apply to designate any public housing for occupancy only by the elderly families or only by families with disabilities, or by elderly families and families with disabilities or will apply for designation for occupancy by only elderly families or only families with disabilities, or by elderly families and families with disabilities as provided by section 7 of the U.S. Housing Act of 1937 (42 U.S.C. 1437e) in the upcoming fiscal year? (If "No", skip to component 10. If "yes", complete one activity description for each development, unless the PHA is eligible to complete a streamlined submission; PHAs completing streamlined submissions may skip to component 10.)

### **2. Activity Description**

- ☐ Yes ☐ No: Has the PHA provided all required activity description information for this component in the **optional** Public Housing Asset Management Table? If "yes", skip to component 10. If "No", complete the Activity Description table below.

<b>Designation of Public Housing Activity Description</b>
1a. Development name:
1b. Development (project) number:
2. Designation type:
Occupancy by only the elderly <input type="checkbox"/>

Occupancy by families with disabilities <input type="checkbox"/>
Occupancy by only elderly families and families with disabilities <input type="checkbox"/>
3. Application status (select one) Approved; included in the PHA's Designation Plan <input type="checkbox"/> Submitted, pending approval <input type="checkbox"/> Planned application <input type="checkbox"/>
4. Date this designation approved, submitted, or planned for submission (DD/MM/YY) _____
5. If approved, will this designation constitute a (select one) <input type="checkbox"/> New Designation Plan <input type="checkbox"/> Revision of a previously approved Designation Plan?
6. Number of units affected: 7. Coverage of action (select one) <input type="checkbox"/> Part of the development <input type="checkbox"/> Total development

## **10. Conversion of Public Housing to Tenant -Based Assistance**

[24CFR Part 903.79(j)]

Exemptions from Component 10; Section 8 only PHAs are not required to complete this section.

### **A. Assessment of Reasonable Revitalization Pursuant to section 202 of the HUD FY1996 HUD Appropriations Act**

1. ☐ Yes ☒ No: Have any of the PHA's developments or portions of developments been identified by HUD or the PHA as covered under section 202 of the HUD FY1996 HUD Appropriations Act? (If "No", skip to component 11; if "yes", complete one activity description for each identified development, unless eligible to complete as a streamlined submission. PHAs completing streamlined submissions may skip to component 11.)
2. Activity Description  
☐ Yes ☐ No: Has the PHA provided all required activity description information for this component in the **optional** Public Housing Asset Management Table? If "yes", skip to component 11. If "No", complete the Activity Description table below.

<b>Conversion of Public Housing Activity Description</b>
1a. Development name:
1b. Development (project ) number:
2. What is the status of the required assessment? <input type="checkbox"/> Assessment underway

<input type="checkbox"/> Assessment results submitted to HUD <input type="checkbox"/> Assessment results approved by HUD (if marked, proceed to next question) <input type="checkbox"/> Other (explain below)
3. <input type="checkbox"/> Yes <input type="checkbox"/> No: Is a Conversion Plan required? (If yes, go to block 4; if no, go to block 5.)
4. Status of Conversion Plan (select the statement that best describes the current status) <input type="checkbox"/> Conversion Plan in development <input type="checkbox"/> Conversion Plan submitted to HUD on: (DD/MM/YYYY) <input type="checkbox"/> Conversion Plan approved by HUD on: (DD/MM/YYYY) <input type="checkbox"/> Activities pursuant to HUD - approved Conversion Plan underway
5. Description of how requirements of Section 202 are being satisfied by means other than conversion (select one) <input type="checkbox"/> Units addressed in a pending or approved demolition application (date submitted or approved: _____) <input type="checkbox"/> Units addressed in a pending or approved HOPE VI demolition application (date submitted or approved: _____) <input type="checkbox"/> Units addressed in a pending or approved HOPE VI revitalization plan (date submitted or approved: _____) <input type="checkbox"/> Requirements no longer applicable: vacancy rates are less than 10 percent <input type="checkbox"/> Requirements no longer applicable: site now has less than 300 units <input type="checkbox"/> Other: (describe below)

<b>B. Reserved for Conversions pursuant to Section 22 of the U.S. Housing Act of 1937</b>
---

**Component 10(B) Voluntary Conversion Initial Assessments**

- a. How many of the PHA's developments are subject to the Required Initial Assessments?  
**Four (4)**
- b. How many of the PHA's developments are not subject to the Required Initial Assessments based on exemptions (e.g., elderly and/or disabled developments not general occupancy projects)? **None**
- c. How many Assessments were conducted for the PHA's covered developments?  
**Four (4)**
- d. Identify PHA developments that may be appropriate for conversion based on the Required Initial Assessments:

Development	Number of Units
Name	
<b>None</b>	


- a. If the PHA has not completed the Required Initial Assessments, describe the status of these assessments: **N/A**

**C. Reserved for Conversions pursuant to Section 33 of the U.S. Housing Act of 1937**

**11. Homeownership Programs Administered by the PHA**

[24CFR Part 903.79(k)]

**A. Public Housing**

Exemptions from Component 11A: Section 8 only PHAs are not required to complete 11A.

1. ☐ Yes ☒ No: Does the PHA administer any homeownership programs administered by the PHA under an approved section 5(h) homeownership program (42 U.S.C. 1437c(h)), or an approved HOPE I program (42 U.S.C. 1437aaa) or has the PHA applied or plan to apply to administer any homeownership programs under section 5(h), the HOPE I program, or section 32 of the U.S. Housing Act of 1937 (42 U.S.C. 1437z -4). (If "No", skip to component 11B; if "yes", complete one activity description for each applicable program/plan, unless eligible to complete a streamlined submission due to **small PHA** or **high performing PHA** status. PHAs completing streamlined submissions may skip to component 11B.)

2. Activity Description

- ☐ Yes ☐ No: Has the PHA provided all required activity description information for this component in the **optional** Public Housing Asset Management Table? (If "yes", skip to component 12. If "No", complete the Activity Description table below.)

**Public Housing Homeownership Activity Description**

<b>(Complete one for each development affected)</b>	
1a. Development name:	
1b. Development (project) number:	
2. Federal Program authority:	
<input type="checkbox"/> HOPEI <input type="checkbox"/> 5(h) <input type="checkbox"/> Turnkey III <input type="checkbox"/> Section 32 of the USHA of 1937 (effective 10/1/99)	
3. Application status: (select one)	
<input type="checkbox"/> Approved; included in the PHA's Homeownership Plan/Program <input type="checkbox"/> Submitted, pending approval <input type="checkbox"/> Planned application	
4. Date Homeownership Plan/Program approved, submitted, or planned for submission: (DD/MM/YYYY)	
5. Number of units affected:	
6. Coverage of action: (select one)	
<input type="checkbox"/> Part of the development <input type="checkbox"/> Total development	

## B. Section 8 Tenant Based Assistance

1. ☐ Yes ☒ No: Does the PHA plan to administer a Section 8 Homeownership program pursuant to Section 8(y) of the U.S.H.A. of 1937, as implemented by 24 CFR part 982? (If "No", skip to component 12; if "yes", describe each program using the table below (copy and complete questions for each program identified), unless the PHA is eligible to complete a streamlined submission due to high performer status. **High performing PHAs** may skip to component 12.)

### 2. Program Description:

#### a. Size of Program

- ☐ Yes ☐ No: Will the PHA limit the number of families participating in the section 8 homeownership option?

If the answer to the question above was yes, which statement best describes the number of participants? (select one)

- ☐ 25 or fewer participants  
☐ 26- 50 participants  
☐ 51 to 100 participants  
☐ more than 100 participants



b. PHA -established eligibility criteria

☐ Yes ☐ No: Will the PHA's program have eligibility criteria for participation in its Section 8 Homeownership Option program in addition to HUD criteria?

If yes, list criteria below:

## **12. PHA Community Service and Self -sufficiency Programs (High Performer)**

[24CFR Part 903.79(l)]

Exemptions from Component 12: High performing and small PHAs are not required to complete this component. Section 8 - Only PHAs are not required to complete sub -component C.

### **A. PHA Coordination with the Welfare (TANF) Agency**

1. Cooperative agreements:

☒ Yes ☐ No: Has the PHA entered into a cooperative agreement with the TANF Agency, to share information and/or target supportive services (as contemplated by section 12(d)(7) of the Housing Act of 1937)?

If yes, what was the date that agreement was signed? 10/02/2000

2. Other coordination efforts between the PHA and TANF Agency (select all that apply)

- ☐ Client referrals
- ☐ Information sharing regarding mutual clients (for rent determinations and otherwise)
- ☐ Coordinate the provision of specific social and self -sufficiency services and program to eligible families
- ☐ Jointly administer programs
- ☐ Partner to administer a HUD Welfare -to-Work voucher program
- ☐ Joint administration of other demonstration program
- ☐ Other (describe)

### **B. Services and programs offered to residents and participants**

#### **(1) General**

a. Self -Sufficiency Policies

Which, if any of the following discretionary policies will the PHA employ to enhance the economic and social self -sufficiency of assisted families in the following areas? (select all that apply)

- ☐ Public housing rent determination policies
- ☐ Public housing admissions policies
- ☐ Section 8 admissions policies
- ☐ Preference in admission to section 8 for certain public housing families
- ☐ Preferences for families working or engaging in training or education programs for non-housing programs operated or coordinated by the PHA
- ☐ Preference/eligibility for public housing homeownership option participation
- ☐ Preference/eligibility for section 8 homeownership option participation
- ☐ Other policies (list below)

b. Economic and Social self-sufficiency programs

- ☐ Yes ☐ No: Does the PHA coordinate, promote or provide any program to enhance the economic and social self-sufficiency of residents? (If "yes", complete the following table; if "no" skip to sub-component 2, Family Self Sufficiency Programs. The position of the table may be altered to facilitate its use.)

Services and Programs				
Program Name & Description (including location, if appropriate)	Estimated Size	Allocation Method (waiting list/random selection/specific criteria/other)	Access (development office/ PHA main office/ other provider name)	Eligibility (public housing or section 8 participants or both)

**(2) Family Self Sufficiency program/s**

a. Participation Description

Family Self Sufficiency (FSS) Participation		
Program	Required Number of Participants (start of FY 2000 Estimate)	Actual Number of Participants (As of: DD/MM/YY)
Public Housing	0	
Section 8	0	

- b. ☐ Yes ☐ No: If the PHA is not maintaining the minimum program size required by HUD, does the most recent FSS Action Plan address the steps the PHA plans to take to achieve at least the minimum program size?  
If no, list steps the PHA will take below:

**C. Welfare Benefit Reductions**

1. The PHA is complying with the statutory requirements of section 12(d) of the U.S. Housing Act of 1937 (relating to the treatment of income changes resulting from welfare program requirements) by: (select all that apply)

- ☐ Adopting appropriate changes to the PHA's public housing rent determination policies and train staff to carry out those policies
- ☐ Informing residents of new policy on admission and reexamination
- ☐ Actively notifying residents of new policy at times in addition to admission and reexamination.
- ☐ Establishing or pursuing a cooperative agreement with all appropriate TANF agencies regarding the exchange of information and coordination of services
- ☐ Establishing a protocol for exchange of information with all appropriate TANF agencies
- ☐ Other: (list below)

**D. Reserved for Community Service Requirement pursuant to section 12(c) of the U.S. Housing Act of 1937**

Community Service Requirement was suspended by Congress. Community Service Requirement will resume for our residents for each annual recertification effective after July 1, 2003.

**13. PHA Safety and Crime Prevention Measures (High Performer)**

[24 CFR Part 903.79(m)]

Exemptions from Component 13: High performing and small PHAs not participating in PHDEP and Section 8 Only PHAs may skip to component 15. High performing and small PHAs that are

### **A. Need for measures to ensure the safety of public housing residents**

#### **1. Describe the need for measures to ensure the safety of public housing residents**

(select all that apply)

- ☐ High incidence of violent and/or drug -related crime in some or all of the PHA's developments
- ☐ High incidence of violent and/or drug -related crime in the area surrounding or adjacent to the PHA's developments
- ☐ Residents fearful for their safety and/or the safety of their children
- ☐ Observed lower -level crime, vandalism and/or graffiti
- ☐ People on waiting list unwilling to move into one or more developments due to perceived and/or actual level of violent and/or drug -related crime
- ☐ Other (describe below)

#### **2. What information or data did the PHA use to determine the need for PHA actions to improve safety of residents (select all that apply).**

- ☐ Safety and security survey of residents
- ☐ Analysis of crime statistics over time for crimes committed "in and around" public housing authority
- ☐ Analysis of cost trends over time for repair of vandalism and removal of graffiti
- ☐ Resident reports
- ☐ PHA employee reports
- ☐ Police reports
- ☐ Demonstrable, quantifiable success with previous or ongoing anti crime/anti drug programs
- ☐ Other (describe below)

#### **3. Which developments are most affected? (list below)**

### **B. Crime and Drug Prevention activities the PHA has undertaken or plan to undertake in the next PHA fiscal year**

#### **1. List the crime prevention activities the PHA has undertaken or plan to undertake:**

(select all that apply)

- ☐ Contracting with outside and/or resident organizations for the provision of crime- and/or drug -prevention activities
- ☐ Crime Prevention Through Environmental Design
- ☐ Activities targeted to at -risk youth, adults, or seniors

- ☐ Volunteer Resident Patrol/Block Watchers Program  
☐ Other (describe below)

2. Which developments are most affected? (list below)

### **C. Coordination between PHA and the police**

1. Describe the coordination between the PHA and the appropriate police precincts for carrying out crime prevention measures and activities: (select all that apply)

- ☐ Police involvement in development, implementation, and/or ongoing evaluation of drug -elimination plan  
☐ Police provide crime data to housing authority staff for analysis and action  
☐ Police have established a physical presence on housing authority property (e.g., community policing office, officer in residence)  
☐ Police regularly testify in and otherwise support eviction cases  
☐ Police regularly meet with the PHA management and residents  
☐ Agreement between PHA and local law enforcement agency for provision of above-baseline law enforcement services  
☐ Other activities (list below)

2. Which developments are most affected? (list below)

### **D. Additional information as required by PHDEP/PHDEP Plan**

PHA eligible for FY 2000 PHDEP funds must provide a PHDEP Plan meeting specified requirements prior to receipt of PHDEP funds.

#### **PHDEP has been eliminated by Congress**

- ☐ Yes ☐ No: Is the PHA eligible to participate in the P HDEP in the fiscal year covered by this PHA Plan?  
☐ Yes ☐ No: Has the PHA included the PHDEP Plan for FY 2000 in this PHA Plan?  
☐ Yes ☐ No: This PHDEP Plan is an Attachment. (Attachment Filename: \_\_\_\_)

### **14. RESERVED FOR PET POLICY**

[24 CFR Part 903.79(n)]

**See Pet Policy at the end of the plan.**

### **15. Civil Rights Certifications**

[24CFRPart903.79(o)]

Civil rights certifications are included in the PHA Plan Certification of Compliance with the PHA Plans and Related Regulations.

## **16. Fiscal Audit**

[24CFRPart903.79(p)]

1. ☒ Yes ☐ No: Is the PHA required to have an audit conducted under section 5(h)(2) of the U.S. Housing Act of 1937 (42 U.S.C. 1437c(h))?  
(If no, skip to component 17.)
2. ☒ Yes ☐ No: Was the most recent fiscal audit submitted to HUD?
3. ☐ Yes ☒ No: Were there any findings as the result of that audit?
4. ☐ Yes ☐ No: If there were any findings, do any remain unresolved?  
If yes, how many unresolved findings remain? \_\_\_\_
5. ☐ Yes ☐ No: Have responses to any unresolved findings been submitted to HUD?  
If not, when are they due (state below)?

## **17. PHA Asset Management (High Performer)**

[24CFRPart903.79(q)]

Exemptions from component 17: Section 8 Only PHAs are not required to complete this component. High performing and small PHAs are not required to complete this component.

1. ☐ Yes ☐ No: Is the PHA engaging in any activities that will contribute to the long-term asset management of its public housing stock, including how the Agency will plan for long-term operating, capital investment, rehabilitation, modernization, disposition, and other needs that have **not** been addressed elsewhere in this PHA Plan?
2. What types of asset management activities will the PHA undertake? (select all that apply)
  - ☐ Not applicable
  - ☐ Private management
  - ☐ Development-based accounting
  - ☐ Comprehensive stock assessment
  - ☐ Other: (list below)
3. ☐ Yes ☐ No: Has the PHA included descriptions of asset management activities in the **optional** Public Housing Asset Management Table?

## **18. Other Information**

[24CFR Part 903.79(r)]

### **A. Resident Advisory Board Recommendations**

1. ☐ Yes ☒ No: Did the PHA receive any comments on the PHA Plan from the Resident Advisory Board/s?
2. If yes, the comments are: (if comments were received, the PHA **MUST** select one)  
☐ Attached at Attachment (Filename)  
☐ Provided below:
3. In what manner did the PHA address those comments? (select all that apply)  
☐ Considered comments, but determined that no changes to the PHA Plan were necessary.  
☐ The PHA changed portions of the PHA Plan in response to comments  
List changes below:  
☐ Other: (list below)

### **B. Description of Election process for Residents on the PHA Board**

1. ☐ Yes ☒ No: Does the PHA meet the exemption criteria provided section 2(b)(2) of the U.S. Housing Act of 1937? (If no, continue to question 2; if yes, skip to sub-component C.)
2. ☒ Yes ☐ No: Was there a resident who serves on the PHA Board elected by the residents? (If yes, continue to question 3; if no, skip to sub-component C.)

#### **3. Description of Resident Election Process**

##### **a. Nomination of candidates for place on the ballot: (select all that apply)**

- ☐ Candidates were nominated by resident and assisted family organizations  
☒ Candidates could be nominated by any adult recipient of PHA assistance  
☐ Self-nomination: Candidates registered with the PHA and requested a place on ballot  
☐ Other: (describe)

##### **b. Eligible candidates: (select one)**

- ☐ Any recipient of PHA assistance  
☐ Any head of household receiving PHA assistance  
☒ Any adult recipient of PHA assistance  
☐ Any adult member of a resident or assisted family organization  
☐ Other (list)

c. Eligible voters: (select all that apply)

- ☒ All adult recipients of PHA assistance (public housing and section 8 tenant based assistance) -
- ☐ Representatives of all PHA residents and assisted family organizations
- ☐ Other (list)

### C. Statement of Consistency with the Consolidated Plan

For each applicable Consolidated Plan, make the following statement (copy questions as many times as necessary).

1. Consolidated Plan jurisdiction: **State of South Carolina**

2. The PHA has taken the following steps to ensure consistency of this PHA Plan with the Consolidated Plan for the jurisdiction: (select all that apply)

- ☐ The PHA has based its statement of needs of families in the jurisdiction on the needs expressed in the Consolidated Plan/s.
- ☐ The PHA has participated in any consultation process organized and offered by the Consolidated Plan agency in the development of the Consolidated Plan.
- ☒ The PHA has consulted with the Consolidated Plan agency during the development of this PHA Plan.
- ☐ Activities to be undertaken by the PHA in the coming year are consistent with the initiatives contained in the Consolidated Plan. (list below)
- ☐ Other: (list below)

4. The Consolidated Plan of the jurisdiction supports the PHA Plan with the following actions and commitments: (describe below)

### D. Other Information Required by HUD

Use this section to provide any additional information requested by HUD.



## Attachments

Use this section to provide any additional attachments referenced in the Plans.

### PET POLICY

#### INTRODUCTION

This document explains the Gaffney Housing Authority's (GHA) policies on the keeping of pets and any criteria or standards pertaining to the policy. The rules adopted are reasonably related to the legitimate interest of the GHA to provide a decent, safe and sanitary living environment for all tenants, to protecting and preserving the physical condition of the property, and the financial interest of the GHA.

#### A. ENABLING REGULATIONS

Section 526 of the Quality Housing and Work Responsibility Act of 1998 (QHWRA) added new Section 31 to the United States Housing Act of 1937 which provides that residents of public housing may own one (1) or more common household pets. This is subject to the reasonable requirements of the local housing authority. The resident must maintain each pet responsibly and in accordance with applicable State and local public health, animal control, animal anti-cruelty laws and regulations, and with the policies established in the agency plan for the housing authority. To this end, the Gaffney Housing Authority has adopted "reasonable" pet requirements. This policy is to be effective upon approval of the GHA Annual Plan for the Fiscal Year beginning on July 1, 2001.

These "Reasonable Pet Requirements" incorporate the various state and local laws governing pets that include inoculating, licensing, and restraint, and provide sufficient flexibility to protect the rights and privileges of other residents who choose not to own pets.

Regulations governing the requirements for pet ownership by persons in developments for the elderly and disabled are located in part 5, subpart C of the Housing Act of 1937. Pet ownership in Gaffney Housing Authority properties have previously been governed by that regulation. As no Gaffney Housing Authority property is designated specifically for the Elderly, and no Elderly person has ever taken advantage of pet ownership permissible under the part 5, subpart C regulation by registering a pet with the housing authority, all pet ownership will now comply with the QWRA rules for pet ownership. Every attempt has been made to construct a pet rule that complies with both regulations.

Service animals are not considered "common household pets" and therefore are not affected by the QWRA regulations. Animals that are necessary as a reasonable accommodation to assist, support or provide service to persons with disabilities are considered "service animals". The possession of an animal by a disabled person does not, in itself, qualify an animal as a service animal. The animal must provide service to the disabled resident above that of a common household pet.

In the event of an emergency or building evacuation it is the responsibility of the pet owner to remove the animal.

#### B. TYPE OF DWELLING UNITS PERMITTING PETS

All residents of GH A are eligible for pets according to the "Pet Policy."

### C. TYPE OF PETS AND NUMBER PER UNIT

A common household pet is defined as being a cat, dog, goldfish or tropical fish, hamster or guinea pig, canary, parakeet, or lovebird. Examples of animals that are not considered common household for purposes of this policy include: Reptiles, amphibians, insects, simians, and other animals not listed above. No dangerous or intimidating pets, i.e., pit -bulldogs, rottweilers, chows, or doberman pinchers, will be permitted.

For the purpose of this policy there will be two (2) classifications of pets that are permissible:

**CLASS A:** Those that require a pet deposit and registration.

This class includes dogs and cats.

**CLASS B:** Those that do not require a pet deposit and do not require registration. It should be noted that although Class B pets do not require deposits or registration, they are still subject to the provisions of this policy and their owners must abide by the applicable rules governing these types of animals. This class includes all other permissible pets: goldfish or tropical fish, hamster or guinea pig, canary, parakeet, or lovebird.

One type of **Class A** pet to a unit will be permitted, i.e.: one cat or dog

And, if the resident desires, they may, in addition, also have:

One type of **Class B** pet, i.e.: one fish or bowl or tank, or one cage with no more than two birds, or one cage with no more than two guinea pigs or two hamsters.

Example: A household may have a registered cat and a cage with two hamsters.

### D. REGULATION REQUIREMENTS PRIOR TO ADMISSION

All **Type A** (dogs and cats) pets must be registered with Management before permission is granted. Registration must show type of pet, recent picture, name, age, and if applicable, license number, and current inoculation information, name and address of the pet's veterinarian, plus a signed responsibility card showing the names of the persons to call to come get the pet in the event of the tenant's illness or death.

Residents will be refused pet registration if management determines the tenant is unable to fulfill their past or future obligations as a pet owner, are unable to adhere to the terms of the lease or house pet rules, the animal does not meet the definition of common household pet, or the temperament of the animal is considered dangerous.

At the time of submission of the "Pet Permit Application" an amount of \$150.00 will accompany the application. This amount will apply toward the pet security deposit if pet application is approved. The pet deposit is to be used to cover cost of damages or fumigation as the result of pet ownership. The pet deposit will be refunded minus any applicable charges in accordance with S.C. law concerning security deposits after resident vacates the unit or the pet is permanently removed from the unit.

In the event the pet owner is incapacitated or no longer available to care for the pet, the person designated on the registration form must remove the pet. In absence of the designated person's availability, management will place the pet with the Cherokee County Humane Society.

#### **E. PET RESPONSIBILITY CARD**

Prior to pet admission, the owner must fill in and sign a written responsibility form showing name, address and phone number of the local person who will come and get the pet in the event of a tenant's illness, vacation, or death. The responsibility form must be renewed each year prior to the effective date of their annual reexamination.

#### **F. PET SECURITY DEPOSIT**

The pet security deposit of \$150.00 for **Type A** pets as stated in "Section D" above will be held in deposit as part of the lease. Upon vacancy this will be refunded minus repairs or damage or necessary fumigation incurred by the pet. Such deposit will be used for services related to flea removal as well as other damages.

Resident's liability for damages caused by his/her pet is not limited to the amount of the pet deposit and the resident will be required to reimburse the GHA for the amount for the real cost of any and all damages caused by his/her pet where they exceed the amount of the pet deposit. If the pet deposit is not sufficient to cover the cost of damages due to pet ownership, the GHA may access the rental security deposit for such damages. If the combined pet deposit and rental security deposit is not sufficient to cover all pet ownership damages, the GHA will enforce collection in accordance with present collection policies.

All units occupied by a dog or cat will be fumigated upon being vacated regardless of the lack of any visible evidence of infestation, the cost of which will be born by the pet security deposit. Infestation of a unit by fleas carried by his/her pet shall be the responsibility of the pet owner.

Any damage caused by a **Type B** pet will be charged through the regular security deposit or through normal maintenance charges in the case of residents still in tenancy.

#### **G. INSURANCE COVERAGE – PET OWNER LIABILITY**

Each pet owner will be encouraged to obtain Liability Insurance of no less than \$10,000 to cover property damage or personal injury caused by their pet. The pet owner is solely responsible for any liability incurred as a result of pet ownership.

#### **H. DOG OWNER REQUIREMENTS**

Any dog must be no less than six (6) months old and completely house broken.

Proof that the dog is already neutered or spayed must be furnished.

Each dog must be licensed by proper Authority and proof of license renewal must be furnished each year by tenant prior to the effective date of their annual reexamination.

The dog must wear a collar at all times showing license and owner's name and address plus a flea collar.

Each year prior to the effective date of their annual reexamination, the tenant must show proof that the dog has had the proper Parvo shots for distemper and rabies, the proof must be signed by a veterinarian.

A dog cannot be over 14 inches tall at the top of the shoulder, or weigh over 25 pounds when it is considered full-grown.

A dog must be on a leash at all times when outside owner's apartment unless it is in an approved locked pet carrier. Small dogs should be held and carried to the parking area or off the property even if on a leash.

Dogs may not be exercised or curbed on Gaffney Housing Authority property. They must be walked or curbed outside of the Gaffney Housing Authority property.

In case that a pet cannot wait and does deposit waste on Gaffney Housing Authority property, the pet owner must have utensils such as a "Pooper Scooper" to use to remove any waste from his pet as soon as it is deposited on Gaffney Housing Authority property. The waste must then be placed in a plastic bag, sealed tightly, and immediately disposed of as trash in a dumpster.

Dogs must only be taken out the front door.

No dog may stay alone in an apartment overnight. It is the responsibility of the resident if they have to leave suddenly and be away overnight to take the pet elsewhere until they return. If a pet is found alone, see Pet Removal policy.

Pet owner must designate an alternative residence for the pet before pet is approved by management.

The flea collar must be changed every three (3) months, and this will be checked upon unit inspection.

## **I. CAT OWNER REQUIREMENTS**

Cats may be not less than six (6) months old.

All cats must be litter trained before admission.

Proof that the cat has been declawed and spayed or neutered must be shown before admission approval.

The cat must wear a collar at all times showing owner's name and address plus a cat flea collar.

Proof must be shown before admission and each year prior to the effective date of their annual reexamination that the cat has had the proper FVR -CP and rabies and distemper shots. This proof must be signed by a veterinarian.

Cat must be on a leash at all times when outside of the owner's apartment unless it is in an approved locked pet carrier. All cats found unattended outdoors will be reported to city animal control as strays.

Tenant must use a Gaffney Housing Authority approved type litter box, which is kept clean daily. Litter must be put in a sealed plastic bag and disposed of daily.

No cat can be over eight (8) inches tall at the shoulders and weigh over 15 pounds.

Cats must be exercised off the Gaffney Housing Authority property.

No cat may stay alone in an apartment overnight. It is the responsibility of the tenant if they have to leave suddenly and be away overnight to take the pet elsewhere until they return. If a pet is found alone, Pet Removal policy.

In case that a pet cannot wait and does deposit waste on Gaffney Housing Authority property, the pet owner must have utensils such as a "Pooper Scooper" to use to remove any waste from his pet as soon as it is deposited on Gaffney Housing Authority property. The waste must then be placed in a plastic bag, sealed tightly, and immediately disposed of as trash in a dumpster.

The flea collar must be changed every three (3) months, and this will be checked upon unit inspection.

All animal waste or litter from cat litter boxes shall be picked up immediately by the pet owner and disposed of in a sealed plastic bag and placed in a dumpster. Cat litters shall be changed at least twice a week.

Cat litters shall not be disposed of by flushing down toilets. Charges for unclogging toilets or clean-up of common areas are required because of attributable pet nuisances shall be billed to and paid by the resident pet owner.

#### **J. BIRD OWNER REQUIREMENTS**

No more than (2) birds to a unit will be permitted, canaries, parakeets, or love birds only. **Noparrots, minahs, or other talking birds.**

The cage must be no larger than three (3) feet high and two (2) feet wide.

Cages must be cleaned daily and debris disposed of in a plastic bag to be in trash immediately.

Birds must be healthy and free of disease at all times.

Birds are not permitted to be left alone in an apartment over two (2) days unless arrangements for daily care have been made by the owner.

Birds should not be allowed outside of their cages.

#### **K. FISH OWNER REQUIREMENTS**

One (1) fish tank only permitted to a unit no bigger than five (5) gallons size, or one (1) large goldfish bowl no more than one gallon size.

Fish may not be alone in the unit over one (1) week unless arrangements for daily care have been made by the owner.

Pet owner must be aware when cleaning or filling fish tanks that water damaged done to the apartment or the adjoining apartments will be billed to the pet owner and any charges must be paid within 30 days of the incident.

#### **L. HAMSTER AND GUINEA PIG OWNER REQUIREMENTS**

No more than (2) hamsters or guinea pigs to a unit will be permitted.

The cage must be no larger than three (3) feet high and three (3) feet wide.

Cages must be cleaned daily and debris disposed of in a plastic bag to be in trash immediately.

Hamsters and guinea pigs must be healthy and free of disease at all times.

Hamsters and guinea pigs are not permitted to be left alone in an apartment for more than two (2) days unless arrangements for daily care have been made by the owner.

Hamsters and guinea pigs should not be allowed outside of their cages.

#### **M. GENERAL POLICY FOR AUTHORIZED PETS**

Pets must go directly from their apartment to the parking area or off the property and back the same way.

Pets are never permitted in another apartment, the office, or the community buildings.

Any pets suffering from illness must be taken within two (2) days to a veterinarian for diagnosis and treatment. The Housing Authority must, upon demand, be shown a statement from the veterinarian indicating the diagnosis. Any pets suspected of suffering symptoms of rabies or any other disease considered to be a threat to health must be immediately removed from the premises until signed evidence from a veterinarian can be produced to indicate that the animal is not so afflicted.

Resident pet owners agree to control the noise of his/her pets such that it does not constitute a nuisance to other tenants. Failure to control pet noise may result in the removal of the pet from the premises.

***PUBLIC HOUSING AUTHORITY SHALL TAKE ALL NECESSARY ACTIONS UNDER THE LAW TO REMOVE ANY PET THAT CAUSES BODILY INJURY TO ANY RESIDENT, GUEST, VISITOR, CONTRACTOR, OR STAFF MEMBER.***

All resident pet owners shall provide adequate care, nutrition, exercise, and medical attention for his/her pet. Pets which appear to be poorly cared for or which are left unattended for longer than 12 hours will be reported to the Humane Society and will be removed from the premises at the pet owner's expense.

In the event of a tenant's sudden illness, the resident pet owner agrees that management shall have discretion with respect to the provision of care to the pet consistent with policy guidelines and at the expense of the resident pet owner unless written instruction with respect to such care is provided in advance by the resident to the GHA office and all care shall be at the resident's expense.

Unwillingness on the part of named caretakers of a pet to assume custody of the pet shall relieve management of any requirement to adhere to any written instruction with respect to the care or disposal of a pet and shall be considered as authorization to management to exercise discretion in such regard consistent with policy guidelines.

Resident pet owners acknowledge that other residents may have chemical sensitivities or allergies related to pets or easily frightened by such animals. The resident, therefore, agrees to exercise common sense and common courtesy with respect to such other resident's right to peaceful and quiet enjoyment of the premises.

#### **N. PET REMOVAL**

Management may move to require the removal of a pet from the premises on a temporary or permanent basis for the following causes:

- a. Creation of a nuisance after proper notification consistent with these Pet Rules. Notices shall be within a forty -eight (48) hour period.
- b. Excessive pet noise or odor with proper notification.
- c. Unruly or dangerous behavior.
- d. Excessive damage to the resident's apartment unit.
- e. Repeated problems with vermin/flea infestation.
- f. Failure of the tenant to provide for adequate care of his/her pet.
- g. Leaving a pet unattended for more than 12 hours.
- h. Failure of the tenant to provide adequate appropriate care.
- i. Tenant serious illness and/or death.
- j. Failure to observe any other rule contained in this section and not otherwise listed upon proper notification.

Tenant shall not alter the interior of their unit, any porch, outdoor utility room, or any area outside the unit to create an enclosure for an animal or bird.

Tenant shall not allow pets to be tied, chained, or otherwise kept, outside of the dwelling unit directly on the grounds of the Authority.

Tenant shall not feed stray or unregistered animals. This shall constitute having a pet without permission of the Authority.

#### **RESIDENT MEMBERSHIP OF THE PHAGOVERNING BOARD**

**Name:** Geraldine Sims

**Method of Selection:** Election by residents

**Term of Appointment:** One year ending March 1, 2004

#### **MEMBERSHIP OF THE RESIDENT ADVISORY BOARD**

**President:** Geraldine Sims

**Vice President:** Lugean Littlejohn

**Secretary/Treasurer:** Brenda Porter

**Member-at-Large:** John Mathis (inactive)

**Member-at-Large:** Gloria Smith (inactive)

New members were installed on March 6, 2003

#### **FOLLOW-UP PLAN – REAC CUSTOMER SERVICE AND SATISFACTION SURVEY**

## Neighborhood Appearance (67.8%)

Scoring below 75% in this area for the third year in a row no longer surprises this Authority. We take great pride in this area and consistently receive compliments from HUD officials, REAC inspectors, local officials, residents, and the general public when they visit our properties. However, we will address the following areas in this Plan Year:

1. Exterior of Buildings: REAC and Housing Authority inspections reveal no major problems in the upkeep of the building exteriors. However, graffiti will be removed should it occur. New roofs and trim on our 2 older (1953) sites have been installed. Major reconstruction of exteriors is not financially feasible at this time. However, in response to Resident Advisory Council comments, exterior improvements have been made part of our Capital Fund Five-Year Plan.

2. Parking Areas: REAC and Housing Authority inspections reveal no major problems in the upkeep of the parking areas. We believe that respondents at our older sites may have reacted to the lack of parking at these sites. Since this survey was completed, we have nearly doubled the amount of parking at our Limestone Court site. We have no immediate plans for any further parking lot improvements. The parking lots are cleaned daily as they have been each year.

3. Recreation Areas: The Authority attempts to maintain existing equipment, but that has been increasingly difficult due to its age. Therefore, the Board of Commissioners has made it a goal to install one piece of new playground equipment (at a cost of \$32,000+ each) at one site per year, if funds allow. The first piece has been installed.

4. Noise & Litter: There is no evidence of excessive environmental noise (industrial, traffic, etc.) or commercial litter (nearby industry, fast food stores, etc.) at any of our sites. Therefore, the source of the noise and litter problem must be within the site and the result of the actions of residents and their guests. We continue to have all litter picked up once each day. We have no plan to offer litter pick-up on a twice-daily schedule. Over the past year, we instructed our community police officers and the local police department to enforce all noise and litter ordinances on our properties. We are not aware of any charges for either violation being prosecuted in court.



## PHA Plan Table Library

### Capital Fund Program Five - Year Action Plan Part I: Summary

PHA Name Gaffney Housing Authority				<input checked="" type="checkbox"/> Original 5 - Year Plan <input type="checkbox"/> Revision No:	
Development Number/Name/HA-Wide	Year 1	Work Statement for Year 2 FFY Grant: 2004 PHAFY: 2004/2005	Work Statement for Year 3 FFY Grant: 2005 PHAFY: 2005/2006	Work Statement for Year 4 FFY Grant: 2006 PHAFY: 2006/2007	Work Statement for Year 5 FFY Grant: 2007 PHAFY: 2007/2008
	Annual State ment				
SC17-1 Limestone		85,385	374,391	78,400	119,794
SC17-2 Granard		280,000	15,194	104,400	119,793
SC17-4 Beltline		-0-	-0-	22,400	75,000
SC17-5 Beltline		-0-	-0-	61,200	-0-
SC17-5 Colonial		-0-	-0-	115,800	75,000
Management Improvements		25,000	-0-	7,385	-0-
Administration		20,800	21,600	21,600	21,600
Fees & Costs		35,000	35,000	35,000	35,000
Replacement Reserve					
Total CFP Funds (Est.)		<b>\$446,185</b>	<b>\$446,185</b>	<b>\$446,185</b>	<b>\$446,185</b>
Total Replacement Housing Factor Funds					

CapitalFundProgramFive -YearActionPlan  
 PartII:SupportingPages —WorkActivities

Activitiesfor Year1	ActivitiesforYear: __2__ FFYGrant:2004 PHAFY:2004/2005			ActivitiesforYear: __3__ FFYGrant:2005 PHAFY:2005/2006		
	<b>SC17-2GranardCourts</b>			<b>SC17-1LimestoneCourts</b>		
	Finishsitework(landscaping,sidewalks)	58	10,000.00	BeginExteriorImprovements		374,391.00
	BeginExteriorImprovements -Extend	58	270,000.00	Extendporchesandporticos		
	porches&porticos,Installfauxcolumns&			Installfauxcolumnsandshutters,		
	shutters,newporchrailingsanddividers			newporchrailingsanddividers		
	<b>SubtotalSC17 -2</b>		<b>\$280,000.00</b>	<b>SubtotalSC17 -1</b>		<b>\$374,391.00</b>
	<b>SC17-1LimestoneCourts</b>					
	BeginExteriorImprovements(seeabove)		85,385.00	<b>SC17-2GranardCourts</b>		
	<b>SubtotalSC17 -1</b>		<b>\$85,385.00</b>	FinishExteriorImprovements -Extend		15,194.00
	PHAProprietarySoftwarePurchase,		12,500.00	porches&porticos,Install fauxcolumns&		
	Installation,&Conversion			shutters,newporchrailingsanddividers		
	Replacecomputerhardware		12,500.00	<b>SubtotalSC17 -2</b>		<b>\$15,194.00</b>
	<b>Subtotal-ManagementImprovements</b>		<b>\$25,000.00</b>			
	<b>HA-WideAdministration</b>					
	Part-timeClerk -of-the-Works	LS	20,800.00			
	<b>SubtotalHA -WideAdministration</b>		<b>20,800.00</b>			
	<b>HA-WideFees&amp;Costs</b>					
	A&EFees	LS	30,000.00			
	CFPPanning&ConsultingFees	LS	5,000.00	<b>HA-WideAdministration</b>		
	<b>SubtotalHA -WideFees&amp;Costs</b>		<b>\$35,000.00</b>	Part-timeClerk -of-the-Works	LS	21,600.00
	<b>GRANDTOTAL</b>		<b>\$446,185.00</b>	<b>SubtotalHA -WideAdministration</b>		<b>\$21,600.00</b>
				<b>HA-WideFees&amp;Costs</b>		
				A&EFees	LS	30,000.00
				CFPPanning&ConsultingFees	LS	5,000.00
				<b>SubtotalHA -WideFees&amp;Costs</b>		<b>\$35,000.00</b>
				<b>GRANDTOTAL</b>		<b>\$446,185.00</b>

**Capital Fund Program Five - Year Action Plan**  
**Part II: Supporting Pages — Work Activities**

Activities for Year 1	Activities for Year: <u>  4  </u> FFY Grant: 2006 PHAFY: 2006/2007			Activities for Year: <u>  5  </u> FFY Grant: 2007 PHAFY: 2007/2008		
	<b>SC17-1 Limestone Courts</b>			<b>SC17-1 Limestone Courts</b>		
	Replace stove & refrigerator	98	78,400.00	Install two playground play units, repair		75,000.00
	<b>Subtotal SC17 -1</b>		<b>\$78,400.00</b>	Or remove existing playground equipment		
	<b>SC17-2 Granard Courts</b>			Playground landscaping		\$44,794.00
	Replace both exterior doors w/ steel door & steel frame	58	58,000.00	<b>Subtotal SC17 -1</b>		<b>\$119,794.00</b>
	Replace stove & refrigerator	58	46,400.00	<b>SC17-2 Granard Courts</b>		
	<b>Subtotal SC17 -2</b>		<b>\$104,400.00</b>	Install two playground play units, repair		75,000.00
	<b>SC17-4 Beltline Court</b>			Or remove existing playground equipment		
	Replace stove & refrigerator	28	22,400.00	Playground landscaping		\$44,793.00
	<b>Subtotal SC17 -4</b>		<b>\$22,400.00</b>	<b>Subtotal SC17 -2</b>		<b>\$119,793.00</b>
	<b>SC17-5 Colonial Heights/Beltline</b>			<b>SC17-4 Beltline Court</b>		
	Replace exterior doors w/ steel door & frame	90	90,000.00	Install two playground play units, repair		75,000.00
	Replace stove & refrigerator	90	72,000.00	Or remove existing playground equipment		
	Cover present wood siding w/ vinyl or equiv.	28	15,000.00	<b>Subtotal SC17 -4</b>		<b>\$75,000.00</b>
	<b>Subtotal SC17 -5</b>		<b>\$177,000.00</b>	<b>SC17-5 Colonial Heights</b>		
	Replace lawn mowing equipment		7,385.00	Install two playground play units, repair		75,000.00
	<b>Subtotal-Management Improvements</b>		<b>\$7,385.00</b>	Or remove existing playground equipment		
	<b>HA-Wide Administration</b>			<b>Subtotal SC17 -5</b>		<b>\$75,000.00</b>
	Part-time Clerk -of-the-Works	LS	21,600.00	<b>HA-Wide Administration</b>		
	<b>Subtotal HA -Wide Administration</b>		<b>\$21,600.00</b>	Part-time Clerk -of-the-Works	LS	21,600.00
	<b>HA-Wide Fees &amp; Costs</b>			<b>Subtotal HA -Wide Administration</b>		<b>\$21,600.00</b>
	A & E Fees	LS	30,000.00	<b>HA-Wide Fees &amp; Costs</b>		
	CFP Planning & Consulting Fees	LS	5,000.00	A & E Fees	LS	30,000.00
	<b>Subtotal HA -Wide Fees &amp; Costs</b>		<b>\$35,000.00</b>	CFP Planning & Consulting Fees	LS	5,000.00
				<b>Subtotal HA -Wide Fees &amp; Costs</b>		<b>\$35,000.00</b>

	<b>GRANDTOTAL</b>		<b>\$446,185.00</b>	<b>GRANDTOTAL</b>		<b>\$446,185.00</b>
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<b>Annual Statement/Performance and Evaluation Report</b>					
<b>Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary</b>					
<b>PHAName:</b> <b>Gaffney Housing Authority</b>		<b>Grant Type and Number</b> Capital Fund Program Grant No: SC16P01750100 Replacement Housing Factor Grant No:			<b>Federal FY of Grant:</b> <b>2000</b>
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no: ) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 12 -31-02 <input checked="" type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total Non - CFP Funds				
2	1406 Operations				
3	1408 Management Improvements Soft Costs				
	Management Improvements Hard Costs	17,000.00	-0-	-0-	-0-
4	1410 Administration	17,763.00	17,763.20	17,763.20	19,812.80
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	35,000.00	40,706.00	40,706.00	40,706.00
8	1440 Site Acquisition				
9	1450 Site Improvement	49,876.00	48,301.42	48,301.42	48,301.42
10	1460 Dwelling Structures	309,640.00	334,458.78	334,458.78	334,458.78
11	1465.1 Dwelling Equipment — Nonexpendable				
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment				
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1499 Development Activities				
19	1502 Contingency	31,000.00	-0-	-0-	-0-

<b>Annual Statement/Performance and Evaluation Report</b> <b>Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary</b>					
<b>PHAName:</b> <p style="text-align: center;"><b>Gaffney Housing Authority</b></p>		<b>Grant Type and Number</b> Capital Fund Program Grant No: SC16P01750100 Replacement Housing Factor Grant No:			<b>Federal FY of Grant:</b> <p style="text-align: center;"><b>2000</b></p>
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:    )					
<input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 12 -31-02 <input checked="" type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
	Amount of Annual Grant: (sum of lines.....)	<b>\$460,279.00</b>	<b>\$460,279.00</b>	<b>\$460,279.00</b>	<b>\$460,279.00</b>
	Amount of line XX Related to LBP Activities				
	Amount of line XX Related to Section 504 compliance				
	Amount of line XX Related to Security --Soft Costs				
	Amount of Line XX related to Security --Hard Costs				
	Amount of line XX Related to Energy Conservation Measures				
	Collateralization Expenses or Debt Service				

<b>Annual Statement/Performance and Evaluation Report</b> <b>Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)</b> <b>Part II: Supporting Pages</b>									
PHAName: Gaffney Housing Authority			<b>Grant Type and Number</b> Capital Fund Program Grant No: SC16P01750100 Replacement Housing Factor Grant No:				<b>Federal FY of Grant:</b> 2000		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories		Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
SC17-1	Sitework (landscaping, sidewalks, etc.)		1450	LS	49,876	48,301.32	48,301.32		Completed
Limestone Courts	Roofing (entire project)		1460	98	190,800	152,417.50	152,417.50		Completed
	Begin Electrical System Upgrade		1460	93	-0-	84,669.90	84,669.90		Completed
	<b>Subtotal SC17 -1</b>				<b>\$240,676.00</b>	<b>\$285,388.72</b>	<b>\$285,388.72</b>		
SC17-4	Install security window screens		1460	28	15,599.00	\$29,260.00	\$29,260.00		Completed
Beltline Courts	Replace vinyl flooring & base		1460	28	61,000.00	\$51,856.00	\$51,856.00		Completed
	Replace closet doors		1460	28	42,241.00	\$33,255.48	\$33,255.48		Completed
	Contingency		1502		31,000.00	-0-	-0-		
	<b>Subtotal SC17 -4</b>				<b>\$149,840.00</b>	<b>\$114,371.48</b>	<b>\$114,371.48</b>		
HA-Wide Management Improvements	PHA Proprietary Software Purchase, Installation, & Conversion		1408		17,000.00	-0-	-0-		Removed
	<b>Subtotal-Management Improvements</b>				<b>\$17,000.00</b>	<b>\$0</b>	<b>\$0</b>		
Administration	Contract for Clerk -of-the-Works		1410		17,763.00	19,812.80	19,812.80		Completed
	<b>Subtotal-Administration</b>				<b>\$17,763.00</b>		<b>19,812.80</b>		
HA-Wide Fees & Costs	Architectural & Engineering Fees		1430.1		30,000.00	35,706.00	35,706.00		Completed
	CFP Planning/Consulting Services		1430.2		5,000.00	5,000.00	5,000.00		Completed
	<b>Subtotal-HA Wide Fees &amp; Costs</b>				<b>\$35,000.00</b>	<b>\$40,706.00</b>	<b>\$40,706.00</b>		
	<b>GRAND TOTAL</b>				<b>\$460,279.00</b>	<b>\$460,279.00</b>	<b>\$460,279.00</b>		

<b>Annual Statement/Performance and Evaluation Report</b> <b>Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)</b> <b>Part III: Implementation Schedule</b>							
PHAName: Gaffney Housing Authority			<b>Grant Type and Number</b> Capital Fund Program No: SC16P01750100 Replacement Housing Factor No:				Federal FY of Grant: 2000
Development Number Name/HA-Wide Activities	All Fund Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
SC17-1	03-31-02	06-30-02		03-31-03		08-15-02	
Limestone Courts							
SC17-4							
Beltline Courts	03-31-02		04-24-01	03-31-03		12-05-01	
HA-Wide Activities	03-31-02	X	X	03-31-03	X	X	Removed –not feasible during PIC conversion
Management							
Improvements							

<b>Annual Statement/Performance and Evaluation Report</b> <b>Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary</b>					
<b>PHA Name:</b> <p style="text-align: center;"><b>Gaffney Housing Authority</b></p>		<b>Grant Type and Number</b> Capital Fund Program Grant No: SC16P01750101 Replacement Housing Factor Grant No:			<b>Federal FY of Grant:</b> <p style="text-align: center;"><b>2001</b></p>
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:    )					
<input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 12-31-02 <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total Non-CFP Funds				
2	1406 Operations				
3	1408 Management Improvements Soft Costs				
	Management Improvements Hard Costs				
4	1410 Administration	18,500.00		18,500.00	15,713.60
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	35,000.00		35,000.00	28,500.00
8	1440 Site Acquisition				
9	1450 Site Improvement	-0-	58,038.00	58,038.00	56,340.00
10	1460 Dwelling Structures	416,144.00	358,106.00	358,106.00	176,898.22
11	1465.1 Dwelling Equipment — Nonexpendable				
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment				
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1499 Development Activities				



Annual Statement/Performance and Evaluation Report					
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary					
PHAName:		Grant Type and Number			Federal FY of Grant:
Gaffney Housing Authority		Capital Fund Program Grant No: SC16P01750101			2001
		Replacement Housing Factor Grant No:			
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no: )					
<input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 12 -31-02 <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
19	1502 Contingency				
	Amount of Annual Grant: (sum of lines.....)	\$469,614.00	\$469,614.00		
	Amount of line XX Related to LBP Activities				
	Amount of line XX Related to Section 504 compliance				
	Amount of line XX Related to Security --Soft Costs				
	Amount of line XX related to Security --Hard Costs				
	Amount of line XX Related to Energy Conservation Measures				
	Collateralization Expenses or Debt Service				

<b>Annual Statement/Performance and Evaluation Report</b> <b>Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)</b> <b>Part II: Supporting Pages</b>									
PHAName: Gaffney Housing Authority			<b>Grant Type and Number</b> Capital Fund Program Grant No: SC17P01750101 Replacement Housing Factor Grant No:				Federal FY of Grant: 2001		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories		Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
SC17-1	Continue Electrical System Upgrade		1460	93	197,321.00	169,126.00			*Ongoing
Limestone Courts	Provide additional parking		1450		40,000.00	58,038.00	58,038.00		Completed
	<b>Subtotal SC17 -1</b>				<b>\$237,321.00</b>	<b>\$227,164.00</b>			
SC17-2	Begin Electrical System Upgrade		1460	55	178,793.00	150,205.00	150,205.00		Completed
Granard Courts									
	<b>Subtotal SC17 -2</b>				<b>\$178,793.00</b>	<b>150,205.00</b>	<b>\$150,205.00</b>		
HA-Wide	Architectural & Engineering Fees		1430.1		30,000.00				
Fees & Costs	Planning & Consulting Fees		1430.2		5,000.00				
	<b>Subtotal HA -Wide Fees &amp; Costs</b>				<b>\$35,000.00</b>				
HA-Wide	Contract for Clerk -of-the-Works Services		1410		18,500.00				
Administration					<b>\$18,500.00</b>				
	<b>GRAND TOTAL</b>				<b>\$469,614.00</b>				

**CapitalFundProgramandCapitalFundProgramReplacementHousingFactor(CFP/CFPRHF)**

PHAName:GaffneyHousingAuthority

**GrantTypeandNumber**

CapitalFundProgramNo: SC17P01750101

ReplacementHousingFactorNo:

<b>FederalFYofGrant:</b>	2001
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\*Allworkcompletedon01 -28-2003

# Annual Statement/Performance and Evaluation Report

## Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary

PHAName: <b>Gaffney Housing Authority</b>	Grant Type and Number Capital Fund Program Grant No: SC16P01750102 Replacement Housing Factor Grant No:	Federal FY of Grant: <b>2002</b>
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☐ Original Annual Statement
 ☐ Reserve for Disasters/Emergencies
 ☐ Revised Annual Statement (revision no: )
 ☒ Performance and Evaluation Report for Period Ending: 12 -31-02
 ☐ Final Performance and Evaluation Report

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total Non -CFP Funds				
2	1406 Operations				
3	1408 Management Improvements Soft Costs				
	Management Improvements Hard Costs				
4	1410 Administration	19,250.00		19,250.00	
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	35,000.00		35,000.00	
8	1440 Site Acquisition				
9	1450 Site Improvement	-0-			
10	1460 Dwelling Structures	391,935.00			
11	1465.1 Dwelling Equipment — Nonexpendable				
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment				
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1499 Development Activities				
19	1502 Contingency				
	Amount of Annual Grant: (sum of lines.....)	<b>\$446,185.00</b>			
	Amount of line XX Related to LBP Activities				
	Amount of line XX Related to Section 504 compliance				
	Amount of line XX Related to Security — Soft Costs				
	Amount of Line XX related to Security -- Hard Costs				
	Amount of line XX Related to Energy Conservation Measures	Capital Fund Program Tables Page 62			
	Collateralization Expenses or Debt Service				

<b>Annual Statement/Performance and Evaluation Report</b> <b>Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)</b> <b>Part II: Supporting Pages</b>									
PHAName : Gaffney Housin g Authority			<b>Grant Type and Number</b> Capital Fund Program Grant No: SC17P01750102 Replacement Housing Factor Grant No:				Federal FY of Grant: 2002		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories		Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
SC17-2	Complete Electrical System Upgrade		1460	55	49,745.00				Completed
Granard Courts									
	<b>Subtotal SC17 -2</b>				<b>\$49,745.00</b>				
SC17-5	Begin kitchen cabinet, countertop, sink, faucet, and dryer connection work		1460	56	342,190.00				Bid date 03-04-03
Colonial Hts.									
	<b>Subtotal SC17 -5</b>				<b>342,190.00</b>				
HA-Wide	Architectural & Engineering Fees		1430.1		30,000.00				
Fees & Costs	Planning & Consulting Fees		1430.2		5,000.00				
	<b>Subtotal HA -Wide Fees &amp; Costs</b>				<b>\$35,000.00</b>				
HA-Wide	Part-time Clerk -of-the-Works		1410		19,250.00				
Administration					<b>\$19,250.00</b>				
	<b>GRAND TOTAL</b>				<b>\$446,185.00</b>				

## Annual Statement/Performance and Evaluation Report

**CapitalFundProgramandCapitalFundProgramReplacementHousingFactor(CFP/CFPRHF)**

## Part III: Implementation Schedule

[illegible]

# Annual Statement/Performance and Evaluation Report

## Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary

PHAName: <b>Gaffney Housing Authority</b>	Grant Type and Number Capital Fund Program Grant No: SC16P01750103 Replacement Housing Factor Grant No:	Federal FY of Grant: <b>2003</b>
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☒ Original Annual Statement
 ☐ Reserve for Disasters/Emergencies
 ☐ Revised Annual Statement (revision no: )
 ☐ Performance and Evaluation Report for Period Ending:
 ☐ Final Performance and Evaluation Report

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total Non - CFP Funds				
2	1406 Operations				
3	1408 Management Improvements Soft Costs				
	Management Improvements Hard Costs				
4	1410 Administration	20,000.00			
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	35,000.00			
8	1440 Site Acquisition				
9	1450 Site Improvement	85,614.00			
10	1460 Dwelling Structures	305,571.00			
11	1465.1 Dwelling Equipment — Nonexpendable				
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment				
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1499 Development Activities				
19	1502 Contingency				
	Amount of Annual Grant: (sum of lines.....)	<b>\$446,185.00</b>			
	Amount of line XX Related to LBP Activities				
	Amount of line XX Related to Section 504 compliance				
	Amount of line XX Related to Security — Soft Costs				
	Amount of Line XX related to Security — Hard Costs				
	Amount of line XX Related to Energy Conservation Measures	Capital Fund Program Tables Page 65			
	Collateralization Expenses or Debt Service				

<b>Annual Statement/Performance and Evaluation Report</b> <b>Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)</b> <b>Part II: Supporting Pages</b>									
PHAName : Gaffney Housing Authority			<b>Grant Type and Number</b> Capital Fund Program Grant No: SC17P01750103 Replacement Housing Factor Grant No:				Federal FY of Grant: 2003		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories		Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
SC17-4 Beltline Court	Kitchen cabinet, countertop, sink, faucet, and dryer connection work		1460		\$109,000.00				
	<b>Subtotal SC17 -4</b>				<b>\$109,000.00.00</b>				
SC17-5 Beltline Court	Finish kitchen cabinet, countertop, sink, faucet, and dryer connection work		1460	56	8,286.00				
	Finish vinyl flooring & base				3,285.00				
	<b>Subtotal SC17 -5</b>				<b>\$11,571.00.00</b>				
SC17-2 Granard Courts	Begin replace water & sewer lines to street		1460		185,000.00				
	Begin site work (landscaping, sidewalks)		1450		85,614.00				
	<b>Subtotal SC17 -2</b>				<b>\$270,614.00.00</b>				
HA-Wide Fees & Costs	Architectural & Engineering Fees		1430.1		30,000.00				
	Planning & Consulting Fees		1430.2		5,000.00				
	<b>Subtotal HA -Wide Fees &amp; Costs</b>				<b>\$35,000.00</b>				
HA-Wide Administration	Part-time Clerk -of-the- Works		1410		20,000.00				
					<b>\$20,000.00</b>				
	<b>GRAND TOTAL</b>				<b>\$446,185.00</b>				



**Annual Statement/Performance and Evaluation Report**  
**Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)**  
**Part III: Implementation Schedule**

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**NOTES:**

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